DLN: 93493137030751 OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2019

Open to Public Inspection

## Form 990

Department of the Treasury

**Return of Organization Exempt From Income Tax** 

▶ Do not enter social security numbers on this form as it may be made public.

► Go to <a href="https://www.irs.gov/Form990">www.irs.gov/Form990</a> for instructions and the latest information.

		nue Service	lendar year, or tax year	r beginn	ing 07-01-2019 and	l ending 06	-30-2020				
		pplicable:	C Name of organization	i begiiii	ing 07-01-2019 , and	renaing 00	-30-2020	D Employ	er iden	tification number	_
		change	WASHINGTON UNIVERSITY					43-065			
	me cha	-	Doing business as						3011		
	tial ret al return	urn ı/terminated									
		return			l is not delivered to street a	ddress) Room	/suite	E Telepho	ne numb	per	
⊐ Ар	plicatio	n pending	700 ROSEDALE AVENUE CB					(314) 9	35-828	83	
			City or town, state or proving SAINT LOUIS, MO 6311214		ry, and ZIP or foreign postal	code					
			·		66					\$ 9,592,365,341	_
			F Name and address of p ANDREW D MARTIN	principal	officer:			Is this a group re	turn fo		
			ONE BROOKINGS DR					subordinates? Are all subordina	tes	□Yes ☑No	
Tax	x-exen	npt status:	ST LOUIS, MO 63130				┤ `´;	included?		☐ Yes ☐No	)
		·		) ( ) <b>◀</b> (ii	nsert no.)	or	I	If "No," attach a Group exemptior	•	•	
W	ebsit	e: > ww	v.wustl.edu				"(c)	Group exemption	i numb	er 🖊	
Forn	n of or	ganization:	✓ Corporation ☐ Trust [	☐ Associ	ation Other >		L Year of	f formation: 1905		ite of legal domicile:	_
. 1 0111	11 01 01	gamzadon.	E corporation E mase i	<b>—</b> A3300	daon 🗀 oaler P				МО		
Pa	art I	Sumi	<b>.</b>								_
			cribe the organization's mington University is a co-ed				a long and	distinguished his	story of	teaching research	
Ų S			unity service. Its schools a				a long and	alberrigatorica mi			
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5			s box ▶ 🔲 if the organiza							1	
ಶ			f voting members of the g		, ,				-	3	52
Ĉ.			f independent voting mem		, ,						47
			ber of individuals employed		, , ,	•			<u> </u>	5 27,4 6 18.5	
£			ber of volunteers (estimat lated business revenue fro		, ,				<u> </u>	6 18,5 'a -4,531,2	
			ated business taxable inco							'b	.50
	"	Net uniei	ated business taxable incol	ine nom	101111 990-1, IIIIe 99 1	• • •	<del>· · ·</del>	Prior Year	<u> </u>	Current Year	_
_	8	Contribut	ons and grants (Part VIII, I	line 1h)				855,494,	240	889,619,0	 07:
Rəvenue			ervice revenue (Part VIII, I	•				2,676,850,		2,821,284,6	
ō۸ċ١	10	Investme	nt income (Part VIII, colum	ın (A), lir	nes 3, 4, and 7d )			528,594,	841	1,325,814,7	71
<u>.</u>	11	Other rev	enue (Part VIII, column (A)	), lines 5	, 6d, 8c, 9c, 10c, and 11	e)		35,548,	547	31,449,8	34
	12	Total reve	nue—add lines 8 through	11 (mus	t equal Part VIII, column	(A), line 12)		4,096,488,	220	5,068,168,2	25:
	13	Grants ar	d similar amounts paid (Pa	art IX, co	lumn (A), lines 1-3 ) .			415,335,	328	443,340,2	29(
	14	Benefits p	aid to or for members (Pa	art IX, col	umn (A), line 4)						(
\$	15	Salaries,	other compensation, emplo	oyee ben	efits (Part IX, column (A	), lines 5–10	)	1,960,065,	812	2,092,588,6	529
ens			nal fundraising fees (Part I	•	, ,						(
Expenses	l		ising expenses (Part IX, colur								
	l	•	enses (Part IX, column (A)		•			1,316,498,		1,401,330,2	
			enses. Add lines 13–17 (m ess expenses. Subtract lin			,		3,691,900, 404,588,	_	3,937,259,1 1,130,909,0	
- Ø	19	Revenue	ess expenses. Subtract in	10 1101	11 IIII	· · ·	Begi	nning of Current		End of Year	
200											
Fund Balances	20	Total asse	ts (Part X, line 16)					14,144,232,	000	15,103,569,0	<u></u>
\$ 2	21	Total liab	lities (Part X, line 26) .					3,095,300,	375	3,335,263,9	<b>9</b> 7:
Z II	22		s or fund balances. Subtra	ct line 21	l from line 20			11,048,931,	625	11,768,305,0	)29
	rt II		<b>iture Block</b> rjury, I declare that I have	o ovamir	and this return, including	accompanyi	na schodula	oc and statement	s and	to the best of my	_
			, it is true, correct, and co			. ,	-			,	ìS
ny k	nowle	dge.									_
		*****						2021-05-17			_
ign		Signatu	re of officer					Date			
lere	:		EAHY CONTROLLER								_
		17	print name and title				T	<u> </u>			_
		P	int/Type preparer's name		Preparer's signature		Date 2021-05-17		PTIN		
aic			rm's name PRICEWATERH	HOUSECOC	DPERS LLP		l	self-employed Firm's EIN ►			
_	oare	;;  .,									
JSE	On	<b>'У</b>   F	rm's address ► 600 13TH NW	STE 1000				Phone no. (202)	414-100	00	
			WASHINGTON,	, DC 2006	05						_
1ay t	he IR:	S discuss	this return with the prepar	rer showı	n above? (see instruction	ns)			. $\square$	Yes ☑ No	

Form	990 (2019)					Page <b>2</b>
Pa	rt III Stateme	nt of Program Ser	vice Accomplis	hments		
	Check if Sc	chedule O contains a re	sponse or note to	any line in this Part III		🗹
1		e organization's missio	<u> </u>	,		
SEE :	SCHEDULE O					
2	Did the organization	on undertake any signi	ficant program ser	vices during the year w	hich were not listed on	
	the prior Form 990	0 or 990-EZ?				🗌 Yes 🛭 No
	If "Yes," describe	these new services on	Schedule O.			
3	Did the organization	on cease conducting, c	r make significant	changes in how it cond	ucts, any program	
	services?					Yes 🗹 No
	If "Yes," describe	these changes on Sch	edule O.			
4	Section $501(c)(3)$		ations are required	to report the amount of	largest program services, as m of grants and allocations to othe	
	(Code:	) (Expenses \$	2,592,235,158	including grants of \$	373,527,104 ) (Revenue \$	2,469,255,258 )
	See Additional Data					
4b	(Code:	) (Expenses \$	573,750,658	including grants of \$	69,744,899 ) (Revenue \$	249,595,710 )
	See Additional Data					
4c	(Code:	) (Expenses \$	232,189,000	including grants of \$	) (Revenue \$	102,433,652 )
	See Additional Data					
4d	Other program se	rvices (Describe in Sch	edule O.)			
	(Expenses \$	248,619,889	including grants of	\$ 68,2	287 ) (Revenue \$	)
4e	Total program s	ervice expenses >	3,646,794,7	05		
		•	, , , , -			Form <b>990</b> (

Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 3   1   ves		990 (2019)			Page 3
Is the organization described in section \$01(c)(3) or 4947(a)(3) (other than a private foundation)? If "Yes," complete Schedule 4".  Is the organization required to complete Schedule 6, Schedule of Contributions (see instructions)? 3.  Did the organization magnet in creat or indirect of this camplete Schedule of Part 1.  Section \$01(c)(3) organizations. Did the organization engage in lobbying activities, or have a section \$01(c)  Bection in effect during the tax yea? If "Yes," complete Schedule C, Part 1.  Section \$01(c)(3) organizations. Did the organization engage in lobbying activities, or have a section \$01(c)(4).  Bettie organization in action \$01(c)(4). \$01(c)(5), or \$01(c)(6) organization that receives membership dues, assessments, or entirely amounts as defined in Revanue Procedure \$19-197 If "Yes," complete Schedule C, Part 81.  Solution organization manuta in any done advised funds or any similar funds or accounts for which conservation to provide active on the distribution or investment of amounts in such funds or accounts If we're, "complete Schedule D, Part 1.  Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic lane areas, or historic structures If "Yes," complete Schedule D, Part 1.  Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic lane areas, or historic structures If "Yes," complete Schedule D, Part 1.  Did the organization receive or historic structures If "Yes," complete Schedule D, Part 1.  Did the organization receive an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part 1.  Did the organization in part an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part X III III No.  Did the organization in Sept an amount for investments—other securities in Part X, line 12? this is 5% or more of its total assets reported in Part X, line 16? If "Yes," co	Par	tiV Checklist of Required Schedules			- No.
2   Yes   Stee organization recuired to complete Schedule 8, Schedule of Contributors (see instructions)?   2   Yes   No   3   Dit the organization rengage in direct or indirect out local campaign activities on behalf of er in opposition to cancidates for public ordine? If Yes, Complete Schedule C, Part I   4   Yes   5   Stee organization activities on the organization rengage in lobbying activities, or have a section 501(h)   4   Yes   5   Stee organization activities of the organization that receives membership dues, assessments or similar amounts as defined in Sevenue Procedure 98-1972 if Yes, "complete Schedule C, Part II   5   No   6   Did the organization maintain any donor advised funds or any similar funds or accounts for which conners have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If Yes, "complete Schedule C, Part II   5   No   6   Did the organization maintain any donor advised funds or any similar funds or accounts? If Yes," complete Schedule C, Part II   5   No   7   Did the organization maintain collections of works of arr, historical treasures, or other similar assets? If Yes, "complete Schedule D, Part II   7   Yes, "complete Schedule	1		1		No
3 Did the organization engage in direct or indirect solitoid campaign activities on behalf of or in appesition to candidates for public office? If "Yes," complete Schedule C, Part II" section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II section 100(14), 501(c)(c), 501(c)(c) application of the section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II section 100(c)(4), 501(c)(c), 501(c)(c), 501(c)(c), 701(c)(c) application of the organization action to 301(c)(4), 501(c)(c), 501(c)(c), 501(c)(c), 701(c)(c), 701(c)(c)(c)(c)(c)(c)(c)(c)(c)(c)(c)(c)(c)(	2			Yes	<del>                                     </del>
election in effect during the tax year? If "Yes," complete Schedule C, Part III 9.  Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar mounts as defined in Revenue Procedure 99-19? If "Yes," complete Schedule C, Part III 9.  6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts if "Yes," complete Schedule D, Part III 9.  7 Ves Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III 9.  8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 9.  9 Did the organization meor an amount in Part X, Ine 21 for escrow or custodial account liability; serve as a custodian for amounts not lated in Part X, ior provide credit counseling, decide management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V.  10 Did the organization for somethic part X, ior provide credit consellin, decide wanagement, credit repair, or debt negotiation and the part X is applicable.  10 Did the organization for somethic part X is provided explained to the part X is applicable.  11 If the organization shall be a part X is applicable.  12 Did the organization shall be a part X is applicable.  13 Ves Did the organization for an amount for investments—organization provided the part X, line 167 If "yes," complete Schedule D, Part VIII.  13 Ves Did the organization and an amount for investments—organization and the part X, line 158 If "Yes," complete Schedule D, Part VIII.  14 Did the organization report an amount for investments—organization provided Schedule D, Part X III.  15 Did the organization shall be a manual than a manual than a manual		Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates			No
Bit the organization maintain amounts as defined in Revenue Procedure 96-197 if "Yes," complete Schedule C, Part III.  6 Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part III.  7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III.  7 Pes DID the organization maintain an amount in Part X, line 25 for secrow or custodial account liability; serve as a custodian for amounts and listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation service? If "Yes," complete Schedule D, Part VIII.  10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, programment endowments, or cusel endowments? If "Yes," complete Schedule D, Part VIII.  11 If the organization assets on any of the following questions is "Yes," then complete Schedule D, Part VIII.  12 Did the organization report an amount for investments—organization report an amount for investments—organization report an amount for investments—organization assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VIII.  13 Did the organization report an amount for investments—organization report an amount for other assets in Part X, line 127 If "Yes," complete Schedule D, Part VIII.  14 Did the organization report an amount for other assets in Part X, line 128 In the system organization report an amount for other labilities in Part X, line 157 If "Yes," complete Schedule D, Part VIII.  15 Did the organization report an amount for other labilities in Part X, line 157 If "Yes," complete Schedule D, Part XIII.  16 Did the organization report an amount for other labilities in Part X, line 157 If "Yes,	4		4	Yes	
to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II	5		5		No
7   Ves   8   Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III   9   Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III   9   Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or cebt negotiation services? If "Yes," complete Schedule D, Part V   10   Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, premarent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V   11   If the organization report an amount for indowing questions is "Yes," then complete Schedule D, Part V   11   If the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part V   11   Yes   11   Y	6	to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete		Yes	
post the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation grevines? If "Yes," complete Schedule D, Part V"  10 Did the organization, freely or through a related organization, hold assets in temporarily restricted endowments, or pass and provided organization. The part X is a splicable.  11 If the organization report an amount for land, buildings, and equipment in Part X, line 197 If "Yes," complete Schedule D, Part V V V V V V V V V V V V V V V V V V V	7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		Yes	
for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V    10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, premanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V    11 If the organization report an amount for land, buildings, and equipment in Part X, line 197 If "Yes," complete Schedule D, Part V    12 Did the organization report an amount for investments—other securities in Part X, line 197 If "Yes," complete Schedule D, Part V    13 Is be organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part V    14 Did the organization report an amount for investments—organs related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part X    15 Did the organization report an amount for other assets in Part X, line 257 If "Yes," complete Schedule D, Part X    16 Did the organization report an amount for other labilities in Part X, line 257 If "Yes," complete Schedule D, Part X    17 Expenditure of the organization included in consolidated financial statements for the tax year: If "Yes," complete Schedule D, Part X    18 Did the organization included in consolidated, independent audited financial statements for the tax year: If "Yes," complete Schedule D, Part X    18 Did the organization maintain an office, employees, or agents outside of the United States?  19 Did the organization maintain an office, employees, or agents outside of the United States, or aggregate foreign investments valued at \$100,000 cmpore If "Yes," complete Schedule E, Parts II and IV    19 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate g	8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8	Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.  b Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII by total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII by total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII by total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XI line 16? If "Yes," complete Schedule D, Part XI line 16? If "Yes," complete Schedule D, Part XI line 16? If "Yes," complete Schedule D, Part XI line 16? If "Yes," complete Schedule D, Part XI line 16? If "Yes," complete Schedule D, Part XI line 16? If "Yes," complete Schedule D, Part XI line 16? If "Yes," complete Schedule D, Part XI line 16? If "Yes," complete Schedule D, Part XI line 16? If "Yes," complete Schedule D, Part XI line 16? If "Yes," complete Schedule D, Part XI line 16? If "Yes," complete Schedule D, Part XI line 16? If "Yes," complete Schedule D, Part XI line 16? If Yes," complete Schedule D, Part XI line 16? If Yes," complete Schedule D, Part XI line 16? If Yes,	9	for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation	9		No
or X as applicable.  a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.  b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.  d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX    Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX    110	10		10	Yes	
Schedule D, Part VI.  Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  11b Yes  11c No  Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X.  Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X.  Did the organization is separate or consolidated financial statements for the tax year include a footnote that addresses the organization is liability for uncertain tax positions under FIN 48 (ASC 74Q)? If "Yes," complete Schedule D, Part X.  Did the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII is optional of If "Yes," and if the organization and included in consolidated, independent audited financial statements for the tax year?  Did the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.  Did the organization as school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.  Did the organization maintain an office, employees, or agents outside of the United States?  Did the organization as adprenance or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and programs service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts II and IV.  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garness or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and		or X as applicable.			
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  10		Schedule D, Part VI. 🥦		Yes	
total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥦		Yes	
in Part X, line 16? If "Yes," complete Schedule D, Part X  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  11d		total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 2 11f Yes 2 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 1 12a No  b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Yes 1 12a No  13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 1 13 Yes 1 14a Yes 1 15 Did the organization have aggregate revenues or expenses of more than \$1,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States? 1 14a Yes 1 14b Yes 1 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 1 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gagregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 1 15 Yes 1 16		in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 115   Yes Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII   No			11e	Yes	<u> </u>
Schedule Ď, Parts XI and XII  Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV  Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part III and IV  Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 6 and \$2 If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 6 and \$2 If "Yes," complete Schedule G, Part II  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  Did the organization report more than \$5,000 of grants or other assistance to this return?  Did the organization report more than \$5,000 of grants or other assistance to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organizati		the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🕏	11f	Yes	
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Is the organization maintain an office, employees, or agents outside of the United States?  Is Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV  Is Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 1c and 8a? If "Yes," complete Schedule G, Part II see instructions)  Is Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  Did the organization report more than \$5,000 of grants or other assistance to	12a		12a		No
14a Did the organization maintain an office, employees, or agents outside of the United States?			12b	Yes	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II (see instructions)  Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  Did the organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  Did the organization or domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.  15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.  16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.  17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II (see instructions)  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  19 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20a No  20a Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  21 Yes	14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	b	business, investment, and program service activities outside the United States, or aggregate foreign investments	14b	Yes	
or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	15	Yes	
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)  18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III  20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  20a No  19 If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  20b 20a  20c Yes  21 Yes  21 Yes	16	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 🥞	16	Yes	
lines 1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"  complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  18 Yes  19 No  20a No		column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17		No
complete Schedule G, Part III		lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  20b  20c  20c  21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		complete Schedule G, Part III			No
Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			20a		No
government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		, , , , , , , , , , , , , , , , , , , ,		Yes	
Form <b>990</b> (2019					- /5040

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Part	Checklist of Required Schedules (continued)			
_			Yes	No
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
}	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
t	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	Yes	
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27		No
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	Yes	
)	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Yes	
2	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c	Yes	
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🛸	29	Yes	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
а	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	. ;		$\overline{\mathbf{A}}$
	Enter the number reported in Roy 3 of Form 1096. Enter -0- if not applicable 1.3 25.692		Yes	No

Par	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by			
h		27,455 <b>2b</b>	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority o		Yes	
_	financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country: ►CI , CH , FR , GM , IT , SP , UG , UK		165	
5a	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBA Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	(R). <b>5a</b>		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organizat solicit any contributions that were not tax deductible as charitable contributions?	ion <b>6a</b>		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts not tax deductible?	were 6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and s provided to the payor?	ervices <b>7a</b>	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to Form 8282?	to file <b>7</b> c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	5 <b>7g</b>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a F 1098-C?	orm <b>7h</b>		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	. 8		No
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	. 9a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
a b	Gross income from members or shareholders			
	against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.	· 13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			١,,
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or e	xcess 14b		
	parachute payment(s) during the year?	. 15	Yes	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	Yes	

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Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "N 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  Check if Schedule O contains a response or note to any line in this Part VI	o" respo	onse to	lines
Se	ction A. Governing Body and Management			
_			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year  1a 52	4		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent  1b 47	,		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	$\label{lem:decomposition} Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: \\$			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	<b>ction B. Policies</b> (This Section B requests information about policies not required by the Internal Revenu	e Code		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes	
Ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		V	
S.	ction C. Disclosure	16b	Yes	
<u> </u>	List the states with which a copy of this Form 990 is required to be filed▶			
	<u>ok</u>			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:  Number of the person who possesses the organization's books and records:  Number of the person who possesses the organization's books and records:  Number of the person who possesses the organization's books and records:  Number of the person who possesses the organization's books and records:  Number of the person who possesses the organization's books and records:  Number of the person who possesses the organization's books and records:  Number of the person who possesses the organization's books and records:	:83		

Name and title

Part VII

and Independent Contractors Check if Schedule O contains a response or note to any line in this Part VII .

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

 $\checkmark$ 

(F)

Estimated

amount of other

compensation

from the

Reportable

compensation

from related

organizations

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount

of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the

organization and any related organizations.

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) (C) (B) (D) (E)

Position (do not check more

than one box, unless person

is both an officer and a

director/trustee)

Reportable

compensation

from the

organization

Average

hours per

week (list

any hours

	for rolated			, .				(W-2/1099- MISC)	(1)/ 2/1000	organization and
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	(W-2/1099- MISC)	organization and related organizations
See Additional Data Table										

Par	Section A. Officers, Direct	tors, Trustees	, Key	Empl	loye	es,	and	High	est Cor	npensat	ed Employees	(conti	nued)	
	(A)  Name and title  Average hours per week (list any hours for related			ne b	ox, u n off tor/t	t channe unle: ficer	<del>_</del>	son a	Repo compe fror organ	D) ortable ensation in the nization /1099-	(E) Reportable compensation from related organizations (W-2/1099-		(F) Estimated amount of other compensation from the organization and	
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		(SC)	MISC)		relati organiza	ed
See A	Additional Data Table						<u> </u>							
												_		
												_		
												-		
1b S	ub-Total	<u></u>		<u>.                                    </u>	Ц.		<u> </u>					$\top$		
_	c Total from continuation sheets to Part VII, Section A													
	otal (add lines 1b and 1c)  Total number of individuals (including					hov	e) who	rece			00.000			1,838,523
_	of reportable compensation from the			ie 1130	cu a	DOV	e) wiic	7 1 6 6 6	erved filo	ie tilali p.	.00,000			
													Yes	No
3	Did the organization list any <b>former</b> line 1a? <i>If "Yes," complete Schedule</i> .						oyee,	-	-	npensated	l employee on	3	Yes	
4	For any individual listed on line 1a, is organization and related organization individual										n the	4	Yes	
5	Did any person listed on line 1a recei services rendered to the organization									tion or inc	ividual for	5		No
	ction B. Independent Contract		al : al					.l			- +100 000 -5			
1	Complete this table for your five high from the organization. Report compe											npens	ation	
	Name a	(A) and business addre	ess							Des	(B) cription of services		(C Compen	
	RTHY BUILDING COMPANIES INC									CONSTRUC	TION SERVICES		95,	,786,881
ST LO	NORTH ROCK HILL RD UIS, MO 63124													
	PPETIT MANAGEMENT COMPANY									FOOD SER	/ICES		17,	,626,290
ST LO	WYDOWN BLVD UIS, MO 63130													
	COLLABORATIVE SOLUTIONS LLC CONSULTING SERVICES 14,916,075													
RESTO	11190 SUNRISE VALLEY DR STE 110 RESTON, VA 20191													
	INTERFACE CONSTRUCTION CORP INC  CONSTRUCTION SERVICES  13,883,042													
BERKE	8401 WABASH BERKELEY, MO 63134  TARLTON CORPORATION  CONSTRUCTION SERVICES 10,370,071													
	5500 WEST PARK AVE													
ST LO	UIS, MO 63110 otal number of independent contractor	rs (including but	not lim	ited t	o th	ose	listed	abov	(e) who r	eceived m	ore than \$100 or	)O of		
	ompensation from the organization <b>&gt;</b>					JJ6	sccu	v	5, WIIO I	Journal II	4100,00		Form 004	2 (2010)

orm 9- Part		(2019) Statement	of I	Pevenue						Page <b>9</b>
rait	VIII				respo	onse or note to any	/ line in this Part VIII			🗆
					•		<b>(A)</b> Total revenue	(B) Related or exempt function	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
10	1:	a Federated campa	aigns	5	<b>1</b> a			revenue		512 - 514
ants		<b>b</b> Membership due	s.	· į	<b>1</b> b					
0 E		<b>c</b> Fundraising ever	nts .		1c	62,361				
ifts, ar £		<b>d</b> Related organiza		ļ	1d					
s, G imil		e Government grants	•	´ [	1e	564,764,661				
Contributions, Gifts, Grants and Other Similar Amounts		f All other contribution and similar amount above	s not	: included	<b>1</b> f	324,792,055				
		g Noncash contribution lines 1a - 1f:\$	ons ir	ncluded in	<b>1</b> g	33,652,595				
Suc Gor		<b>h Total.</b> Add lines	1a-1	.f		>	889,619,077			
						Business Code				
	2a	RESEARCH - CONTRA	ACTS	OTHER		541700	249,595,710			249,595,710
Program Service Revenue	b	TUITION AND FEES				611600	746,648,665	746,648,665		
ice Re	c	PATIENT, LAB AND H	IOSPI	ITAL SUPPORT		621110	1,629,022,346	1,629,022,346		
ı Servi	d	AUXILIARY SALES AN	ND SE	ERVICE		611710	102,433,652		626,101	101,807,551
ogram	е	EDUCATIONAL SALES	S ANI	D SERVICE		611710	93,584,247	82,399,893	2,474,151	8,710,203
ď	f	All other program	serv	/ice revenue						
	g	Total. Add lines	2a-2	2f	. •	2,821,284,620				
		Investment income similar amounts) .		cluding divid		interest, and other	44,765,796		-18,994,493	63,760,289
		Income from inves				ond proceeds	•			
	5	Royalties					5,237,866			5,237,866
				(i) Rea	al	(ii) Personal				
		Gross rents	6a							
	b	Less: rental expenses	6b							
	С	Rental income or (loss)	6c							
	ď	Net rental income	e or	(loss)		· · · · <b>&gt;</b>				
				(i) Secur	ities	(ii) Other				
	7a Gross amount from sales of assets other than inventory			P						
	b	Less: cost or other basis and sales expenses	7b	4,496,8	319,829	9 27,348,02	2.5			
		Gain or (loss)	7c	<u>' '</u>						
		d Net gain or (loss) Gross income from for			· · ·	· · · •	1,281,048,915			1,281,048,915
Other Revenue		(not including \$ contributions reporte See <b>Part IV</b> , line 18	d on	62,361 of	8a	17,584	1			
Re	Ŀ	Less: direct exper	ises		8b	29,235				
ther	(	c Net income or (los	ss) fi	rom fundrais	ing ev	ents	-11,651			-11,651
	9a	Gross income from See <b>Part</b> IV, line 19			9a					
	Ł	• Less: direct exper	ises		9b					
	(	o Net income or (los	ss) fi	rom gaming	activit	ies 🕨	_			
	10	aGross sales of inverse returns and allowa	ento	ry, less	100					
	ŀ	Less: cost of good			10a 10b	-	$\dashv$			
		Net income or (los			invent	tory ►				
	11	Miscellaneo				Business Code 61171	0 26 222 620	14 122 112	11 262 045	727 572
		La OTHER EDUCATION	∪NAI	L KEVENUE		011/1	26,223,629	14,123,112	11,362,945	737,572
	ŀ	·								
	ď	<u> </u>								
		d All other revenue								
	•	<b>Total.</b> Add lines 1	.1a-:	11d		•	26,223,629			
	12	<b>2 Total revenue.</b> S	See ii	nstructions			5,068,168,252		-4,531,296	1,710,886,455
	_			_		<del></del>				Form 000 (2010)

Form 990 (2019)				Page <b>10</b>
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations mus		_		mn (A).
Check if Schedule O contains a response or note to	any line in this Part IX			<u> 🗆</u>
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	60,735,339	60,735,339		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	371,775,688	371,775,688		
<b>3</b> Grants and other assistance to foreign organizations, foreig governments, and foreign individuals. See Part IV, lines 15 and 16.	n 10,829,263	10,829,263		
<b>4</b> Benefits paid to or for members	0			
<b>5</b> Compensation of current officers, directors, trustees, and key employees	13,224,700	751,899	11,348,651	1,124,150
<b>6</b> Compensation not included above, to disqualified persons (defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$		10,090,546	8,832,655	1,302,045
<b>7</b> Other salaries and wages	1,631,420,097	1,559,495,552	52,972,013	18,952,532
8 Pension plan accruals and contributions (include section 40 (k) and 403(b) employer contributions)	96,493,520	91,559,732	3,648,377	1,285,411
9 Other employee benefits	234,063,192	217,074,202	13,777,773	3,211,217
<b>10</b> Payroll taxes	97,161,874	90,869,335	4,972,644	1,319,895
<b>11</b> Fees for services (non-employees):				
a Management	0			
<b>b</b> Legal	7,749,583	3,463,431	4,281,548	4,604
<b>c</b> Accounting	602,783	3,560	599,223	
<b>d</b> Lobbying	377,306	54,708	322,598	
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	85,404,553		85,404,553	
<ul><li>g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)</li></ul>	156,266,479	148,386,795	6,608,021	1,271,663
12 Advertising and promotion	2,592,927	2,546,621	40,262	6,044
13 Office expenses	147,369,276	133,204,803	12,439,118	1,725,355
14 Information technology	51,586,982	27,638,186	22,591,353	1,357,443
15 Royalties	0			
<b>16</b> Occupancy	142,560,866	114,155,076	26,773,908	1,631,882
<b>17</b> Travel	32,969,949	29,046,106	2,562,360	1,361,483
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials .	5,521	5,521		
19 Conferences, conventions, and meetings	9,303,659	7,885,023	178,662	1,239,974
<b>20</b> Interest	70,200,332	67,399,339	2,758,873	42,120
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	201,972,622	194,681,410	6,846,872	444,340
23 Insurance	36,286,828	36,161,145	125,683	

422,569,264

-1,661,873

18,715,798

15,574,817

3,937,259,184

882,593

422,569,038

-1,664,758

15,487,964

15,574,817

17,014,364

3,646,794,705

2,885

1,502,944

-16,163,484

252,427,492

226

1,724,890

31,713

38,036,987

Form **990** (2019)

24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

**b** CONTRACTUAL ALLOWANCE BAD DEBT EXPENSE

Total functional expenses. Add lines 1 through 24e
 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.
 Check here ► ☐ if following SOP 98-2 (ASC 958-720).

c ENTERTAINMENT AND SOCIAL EXPENSES

expenses on Schedule O.)

a MEDICAL SUPPLIES

d LIBRARY VOLUMES

e All other expenses

Form 990 (2019)

316,246,059

441,909,185

463,235,202

8,145,134

22.412.233

19,589,556

2,902,823,365

4,229,069,480

6.387,456,193

81,211,884

231,470,709

575,332,743

158,348,333

245.111.589

145,782,770

186,241,424

2,024,447,112

3.335.263.971

5,885,728,642

5,882,576,387

11,768,305,029

15,103,569,000

Form 990 (2019)

15,103,569,000

End of year

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Page **11** 

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Liabilities 22

Fund Balances

٥ 29

Assets 30

Cash-non-interest-bearing . . . . . .

Intangible assets .

Grants payable .

Deferred revenue . . .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Savings and temporary cash investments . . . Accounts receivable, net

Pledges and grants receivable, net . . . Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). Notes and loans receivable, net . . . Assets Inventories for sale or use . .

Prepaid expenses and deferred charges . 10a Land, buildings, and equipment: cost or other

basis. Complete Part VI of Schedule D b Less: accumulated depreciation

Other assets. See Part IV, line 11 . . .

Accounts payable and accrued expenses .

Tax-exempt bond liabilities . . .

11 Investments—publicly traded securities . 12 Investments—other securities. See Part IV, line 11 . . .

**Total assets.** Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Organizations that follow FASB ASC 958, check here <a> \square</a> and

Unsecured notes and loans payable to unrelated third parties .

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances .

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity 

Other liabilities (including federal income tax, payables to related third parties,

Organizations that do not follow FASB ASC 958, check here ightharpoonup and

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

10a 10b

Check if Schedule O contains a response or note to any line in this Part IX . . . . .

5,612,588,701 Investments-program-related. See Part IV, line 11 .

2,709,765,336

2,736,428,196 4,453,206,556 5.270.729.909 222,983,683 14,144,232,000 692,818,953

Beginning of year

400,100,017

389,943,865

529,206,646

388,889 3.081.297

22.108.553

27,405,670

379.804.300

105,377,111

187,967,912

1,578,905,735

3.095.300.375

5,476,886,117

5,572,045,508

11,048,931,625

14,144,232,000

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

3a

3b

Yes

Yes (2019)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Audit Act and OMB Circular A-133?

## **Additional Data**

**Software ID:** 19009610

**Software Version:** 19.2.1.0 **EIN:** 43-0653611

Name: WASHINGTON UNIVERSITY

Form 990 (2019)

Form 990, Part III, Line 4a:

INSTRUCTION - THIS CATEGORY INCLUDES EXPENDITURES FOR ALL ACTIVITIES THAT ARE PART OF AN INSTITUTIONS INSTRUCTION PROGRAM, WITH THE EXCEPTION OF EXPENDITURES FOR REMEDIAL AND TUTORIAL INSTRUCTION, WHICH ARE CATEGORIZED AS STUDENT SERVICES. EXPENDITURES FOR CREDIT AND NON-CREDIT COURSES FOR ACADEMIC, OCCUPATIONAL, VOCATIONAL AND MEDICAL CARE INSTRUCTION, AND FOR REGULAR, SPECIAL AND EXTENSION SESSIONS ARE INCLUDED. ATTENDANCE FALL SEMESTER 16,291 AND SPRING SEMESTER 15,229 APPROXIMATELY 359,618 PATIENTS WERE TREATED BY MEDICAL SCHOOL FACULTY AND STUDENTS.

RESEARCH - THIS CATEGORY INCLUDES ALL EXPENDITURES FOR ACTIVITIES SPECIFICALLY ORGANIZED TO PRODUCE RESEARCH OUTCOMES, WHETHER COMMISSIONED BY AN AGENCY EXTERNAL TO THE INSTITUTION OR SEPARATELY BUDGETED BY AN ORGANIZATIONAL UNIT WITHIN THE INSTITUTION. SUBJECT TO THESE CONDITIONS, IT INCLUDES EXPENDITURES FOR INDIVIDUAL AND/OR PRODUCT RESEARCH AS WELL AS THOSE OF THE INSTITUTES AND RESEARCH CENTERS. REVENUES EXCLUDE

GOVERNMENT GRANTS WHICH ARE REPORTED AS CONTRIBUTIONS. DURING FISCAL YEAR 2020, THE UNIVERSITY RECEIVED 3,265 DIRECT AND INDIRECT AWARDS.

Form 990, Part III, Line 4b:

## AUXILIARY AND STUDENT SUPPORT SERVICES - EXPENSES INCURRED ARE PRIMARILY FOR THE SUPPORT OF STUDENTS. AUXILIARY ACTIVITIES INCLUDING STUDENT HOUSING, FOOD SERVICE, TRANSPORTATION AND CAMPUS PARKING. STUDENT SERVICES ARE THOSE ACTIVITIES THAT DIRECTLY SUPPORT THE STUDENTS BUT DO NOT OUA- LIFY AS MANAGEMENT AND GENERAL COSTS. SIGNIFICANT COMPONENTS INCLUDE CENTRAL AND SCHOOL-SPECIFIC ADMISSIONS. REGISTRARS. CAREER

PLANNING AND PLACEMENT OFFICES, STUDENT FINANCIAL AID LOAN OFFICES, STUDENT HEALTH SERVICES, ATHLETICS, STUDENT ACTIVITES OFFICE, INTERNATIONAL

Form 990, Part III, Line 4c:

STUDENTS OFFICE, AND THE VICE CHANCELLOR FOR STUDENTS OFFICE.

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless hours per compensation amount of other compensation week (list person is both an officer from the from related compensation and a director/trustee) organization organizations

	any hours				r/tr	ustee	)	organization	organizations	from the organization and
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	organizations (W- 2/1099- MISC)  0 0	related organizations
MARK S WRIGHTON TRUSTEE, FORMER CHANCELLOR	41.00	Х						2,830,639	0	64,299
SCOTT L WILSON CHIEF INVESTMENT OFFICER	40.00			х				2,503,971	0	98,843
TIMOTHY J EBERLEIN CHAIR OF SURGERY/DIR SITEMAN CANCER CTR	40.00					х		1,657,629	0	64,156
DAVID H PERLMUTTER EXEC VC FOR MEDICAL AFFAIRS	40.00			х				1,581,936	0	29,914
MATTHEW B DOBBS  DR ASA C MRS DOROTHY W JONES PROF ORTHO SURGERY	40.00					x		1,500,098	0	43,179

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1,430,971

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40.00 JOHN C CLOHISY

and Independent Contractors

DB VIEHMANN DIST PROF OF ORTHO SURGERY

GERALDINE J. ROBERT L. VIRGIL PROFESSOR

PROVOST EXEC VC FOR ACADEMIC AFFAIRS

HERBERT HOLDEN THORP JR - until 715

RALPH G DACEY JR

MAHENDRA R GUPTA

HENRY STEVEN WEBBER

EXEC VC FOR ADMINISTRATION

DEPT HEAD NEUROSURGERY

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

			(1) 2/4000							
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
ANDREW D MARTIN CHANCELLOR	40.00			х				893,299	0	104,461
DAVID THOMAS BLASINGAME FORMER EXEC VC FOR ALUMNI AND DEV	40.00						х	741,892	0	44,731
MARION CRAIN - effective 71619 INTERIM PROVOST EXEC VC FOR ACADEMIC AFFAIRS	40.00			х				514,246	0	38,314
MICHAEL R CANNON FORMER EXEC VC GENERAL COUNSEL	40.00						х	489,890	0	48,681
PAMELLA A HENSON	40.00									

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439,455

455,750

430,526

419,541

443,069

406,196

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76,696

29,986

51,825

51,579

16,402

36,053

INTERIM PROVOST EXEC VC FOR ACADEMIC AFFAIRS
MICHAEL R CANNON
FORMER EXEC VC GENERAL COUNSEL
PAMELLA A HENSON
EXEC VC FOR AD PROGRAMS

LORI S WHITE - until 5312020

......

VC FOR UNIVERSITY ADVANCEMENT

VC FOR INTERNATIONAL AFFAIRS

VC CHIEF INFORMATION OFFICER

VC FOR STUDENT AFFAIRS

WILLIAM S STOLL

KURT T DIRKS

CHRIS KIELT

JENNIFER K LODGE

VC FOR RESEARCH

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the

	arry riours	""	u un	CCCC	,, .,	usice,	,	(11/ 2/1000		1 110111 (110
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	(W- 2/1099- MISC)		organization and related organizations
MONICA J ALLEN VC GENERAL COUNSEL	40.00			х				388,010	0	40,637
AMY B KWESKIN VC FOR FINANCE CFO	40.00 1.50			х				366,482	0	58,853
JAMES WERTSCH FORMER VC FOR INTL AFFAIRS	40.00						х	338,577	0	56,709
LEGAIL POOLE CHANDLER	40.00			х				328,967	0	42,586

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314,654

322,804

269,641

222,876

37,085

40,325

27,725

35,451

45,744

JAMES WERTSCH	40.00				х	338,577	
FORMER VC FOR INTL AFFAIRS					, ,	555,517	
LEGAIL POOLE CHANDLER	40.00						
VC FOR HUMAN RESOURCES	••••••		Х			328,967	
DEDRIC A CARTER	40.00		,,			222 227	
VC FOR OPERATIONS TECH TRANSFER			Х			332,237	

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and Independent Contractors

ERIC B UPIN

MARK AMIRI

PAMELA SUE LOKKEN

VC FOR PUBLIC AFFAIRS

JILL DIANE FRIEDMAN - until 1120

......

ASSOC VC FOR FINANCE TREASURER

INTERIM VC FOR STUDENT AFFAIRS

ROBERT WILD - effective 612020

...... VC - GOVERNMENT COMMUNITY RELATIONS

TRUSTEE

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the

	formulated		u un			45000,	′	(14/ 2/1000	(14/ 2/4000	evernization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JULIE A FLORY - effective 112020 INTERIM VC FOR PUBLIC AFFAIRS	40.00			х				183,982	0	32,594	
IDA H EARLY SECRETARY BD OF TRUSTEES	40.00			х				170,365	0	29,878	
EDWARD D WELKER FORMER VC CHIEF INFORMATION OFFICER	40.00						X	157,266	0	37,412	
F GILBERT BICKEL III TRUSTEE	1.00	Х						0	0	0	
TODD M BLUFDORN	000.50										

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TORNIER VE CHIEF IN ORNATION OF ICER
F GILBERT BICKEL III
TRUSTEE
TODD M BLUEDORN
TRUSTEE

STEPHEN F BRAUER

HOWARD N CAYNE

MAXINE CLARK

DAVID P CONNER

CORINNA COTSEN

**TRUSTEE** 

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE - VICE CHAIR

......

and Independent Contractors

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
GEORGE W COUCH III TRUSTEE	2.00	Х						0	0	0
SCOTT W FANCHER TRUSTEE	000.50	Х						0	0	0
JON H FELTHEIMER TRUSTEE	000.50	Х						0	0	0
LEE FIXEL TRUSTEE	000.50	Х						0	0	0
GAURAV GARG TRUSTEE	1.00	Х						0	0	0
ANDREA J GRANT	2.00									

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LEE FIXEL
TRUSTEE
GAURAV GARG
TRUSTEE

LOUIS G HUTT JR

GREGORY L HYSLOP

ALBERT YEUK KEUNG IP

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TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

JAY JACOBS

and Independent Contractors

(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) organizations

	any hours	and	a dir	ecto	r/tr	ustee	)	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	<u> </u>	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)		organization and related organizations
DONALD A JUBEL TRUSTEE	2.00	х						0	0	0
EUGENE S KAHN TRUSTEE	2.00	х						0	0	0
DAVID W KEMPER TRUSTEE - VICE CHAIR	2.00	х		х				0	0	0

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TRUSTEE						
DAVID W KEMPER	2.00	Х	Х		0	
TRUSTEE - VICE CHAIR						
JERALD L KENT	2.00	×			0	
TRUSTEE						
RICHARD 1 LIEKWEG	1.00					

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and Independent Contractors

TRUSTEE

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TRUSTEE

ANNA MANNING

VICKI MATCH SUNA

SUSAN B MCCOLLUM

ALICIA MCDONNELL

JAMES M MCKELVEY JR

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(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

	arry riours	and	. a un	CCCC	J1 / C1	usice,	,	organization	organizacions	mom the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
ANDREW D NEWMAN TRUSTEE - CHAIR	3.00	х		х				0	0	0	
STEVEN CASH NICKERSON TRUSTEE	1.00	х						0	0	0	
JAMES V ODONNELL TRUSTEE	2.00	х						0	0	0	
WILLIAM B POLLARD III	1.00										

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TRUSTEE
JAMES V ODONNELL
TRUSTEE
WILLIAM B POLLARD III
TRUSTEE

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MICHAEL POWELL

RICHARD S RITHOLZ

RAKESH SACHDEV

CRAIG D SCHNUCK

TRUSTEE - VICE CHAIR

ROBERT J SKANDALARIS

NICHOLAS E SOMERS

TRUSTEE

TRUSTEE

**TRUSTEE** 

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TRUSTEE

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer week (list from related from the compensation

	any hours	and	l a dir	recto	r/tr	ustee)	)	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
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MARY DANFORTH STILLMAN TRUSTEE	2.00	х						0	0	0	
DIANE M SULLIVAN	000.50	х						0	0	0	

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BARBARA SCHAPS THOMAS

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LAWRENCE E THOMAS

RONALD L THOMPSON

ANN RUBENSTEIN TISCH

HENRY D WARSHAW

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DIANE M SULLIVAN	000.50	X			0	0	
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and Independent Contractors (C) (D) (A) (B) (E) (F) Name and Title Position (do not check more Reportable Reportable Average Estimated than one box, unless compensation compensation amount of other hours per

	week (list any hours	any hours and a director/trustee)							from related organizations	compensation from the	
	any hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
KELLI P WASHINGTON TRUSTEE	2.00	х						0	0	0	
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LYNDA HEANEY - effective 22820

VC FOR MEDICAL ADVANCEMENT

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SCI	HFD	ULE A		Charity Statu	e and Dul	hlic Sunn	ort	OMB No. 1545-0047					
	m 99			rganization is a sect 4947(a)(1) nonexe ▶ Attach to Form	ion 501(c)(3) empt charitable	organization or trust.		2019					
		f the Treasury	► Go to <u>www.irs</u>	.gov/Form990 for i	nstructions and	I the latest info	ormation.	Open to Public Inspection					
Nam	e of th	<del>nie Service</del> <b>he organiza</b> N UNIVERSITY	tion				Employer identific						
		N UNIVERSITY					43-0653611						
	rt I		for Public Charity State				See instructions.						
1 ne c	rganız		a private foundation because	•	•		(A)(:)						
		·	onvention of churches, or as										
2	<b>✓</b>		scribed in section 170(b)(		,								
3		·	or a cooperative hospital serv	-			-						
4		A medical research organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii).</b> Enter the hospital's name, city, and state:											
5			ation operated for the benefi (iv). (Complete Part II.)	t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	ped in <b>section 170</b>					
6		A federal, s	tate, or local government or	governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)(A	ı)(v).						
7			ation that normally receives ( <b>0(b)(1)(A)(vi).</b> (Complete		s support from a	governmental u	nit or from the gener	al public described in					
8		A communi	ty trust described in <b>sectior</b>	170(b)(1)(A)(vi).	(Complete Part I	I.)							
9			ural research organization de rant college of agriculture. S					ege or university or a					
10		from activit investment	ation that normally receives: lies related to its exempt fur income and unrelated busin See section 509(a)(2). (Co	ections—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	pport from gross					
11		An organiza	ation organized and operated	d exclusively to test fo	r public safety. S	See <b>section 509</b>	(a)(4).						
12		more public	ation organized and operated ly supported organizations of through 12d that describes	described in <b>section 5</b>	<b>09(a)(1)</b> or sec	ction 509(a)(2	). See <b>section 509(</b> a						
a		<b>Type I.</b> A so	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B.	ated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by						
b		Type II. A manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A	ervised or controlled i ation vested in the sar									
c		Type III f	unctionally integrated. A sorganization(s) (see instruction)	supporting organizatio				ted with, its					
d		Type III n functionally	on-functionally integrate integrated. The organizatio i). You must complete Pai	<b>d.</b> A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar						
e		Check this	box if the organization receiver or Type III non-functionally	ved a written determir	nation from the I		pe I, Type II, Type II	I functionally					
f	Enter		• • • • • • • • • • • • • • • • • • • •		-		<u> </u>						
g	Provi	de the follow	ing information about the su	pported organization(	r '								
	(i) N	Name of supp organizatior		(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)					
					Yes	No							
			<u> </u>										
Tota			tion Act Notice, see the I		Cat. No. 11285		Schedule A (Form 9						

	Support Schedule for (Complete only if you c If the organization faile	hecked the box o	on line 5, 7, or 8	of Part I or if th	ne organization f	ailed to d		
_	Section A. Public Support	u to quality unde	i the tests lister	a below, please (	complete Part II.	1.)		
_	Calendar year	(a) 201E	(h) 2016	(a) 2017	(4) 2019	(-) 20	10	(f) Total
	(or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 20	19	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") .	702,970,970	705,088,730	995,937,669	855,494,240	889,6	519,077	4,149,110,686
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3	702,970,970	705,088,730	995,937,669	855,494,240	889,6	519,077	4,149,110,686
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).							
6	Public support. Subtract line 5							4,149,110,686
	from line 4.							4,145,110,000
	Section B. Total Support  Calendar year	T	T	Т	T			
	(or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 20	19	(f) Total
7	Amounts from line 4	702,970,970	705,088,730	995,937,669	855,494,240	889,6	519,077	4,149,110,686
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	12,157,656	17,259,162	83,828,048	64,710,335	68,998,155		246,953,356
9	Net income from unrelated business activities, whether or not the business is regularly carried on	2,857,907						2,857,907
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).	28,318,994	22,593,426	18,296,248	19,849,228	14,8	378,268	103,936,164
11	<b>Total support.</b> Add lines 7 through 10					, ,		4,502,858,113
12	Gross receipts from related activities,	etc. (see instruction	ons)			12		12,483,415,461
13	First five years. If the Form 990 is f							_
	check this box and ${f stop\ here}$					<u>.</u>	. ▶ 🗆	]
	Section C. Computation of Publ							
	Public support percentage for 2019 (I					14		92.140 %
	Public support percentage for 2018 S					15		92.150 %
16	a <b>33 1/3% support test—2019.</b> If th							
ŀ	and <b>stop here.</b> The organization qua 33 1/3% support test—2018. If t	he organization did	I not check a box o	on line 13 or 16a, a	and line 15 is 33 1/	'3% or mo	re, checl	k this
17:	box and <b>stop here.</b> The organizatio <b>a 10%-facts-and-circumstances tes</b> is 10% or more, and if the organizati in Part VI how the organization meet:	st— <b>2019.</b> If the or on meets the "facts	ganization did not s-and-circumstanc	check a box on lin es" test, check this	e 13, 16a, or 16b, s box and <b>stop he</b> i	and line 1 <b>re.</b> Explair	լ4 Դ	▶□
ŀ	organization	est—2018. If the o ization meets the "	rganization did no facts-and-circums	t check a box on li tances" test, check	ne 13, 16a, 16b, o this box and <b>stop</b>	r 17a, and <b>here.</b>	line	▶□
18	supported organization							▶□
	instructions							▶ 🗆

Ľ	Support Schedule for	Organization	s Described in	Section 509(a	a)(2)		
	(Complete only if you ch	necked the box	on line 10 of Pa	art I or if the or	ganization faile	d to qualify und	er Part II. If
	the organization fails to	qualify under t	the tests listed b	pelow, please co	omplete Part II.	)	
Se	ection A. Public Support			-			
	Calendar year	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	(or fiscal year beginning in) ▶	(a) 2013	(D) 2010	(0) 2017	(u) 2016	(e) 2019	(I) Iotai
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.") .						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
-	Amounts included on lines 1, 2, and						
/ d	3 received from disqualified persons						
h	Amounts included on lines 2 and 3						

from line 6.) Section B. Total Support

> (Explain in Part VI.) . . Total support. (Add lines 9, 10c,

11, and 12.). .

14

15

16

13 for the year. c Add lines 7a and 7b. .

received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line

Public support. (Subtract line 7c

	Calendar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
С	Add lines 10a and 10b.						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets						

First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . .

check this box and stop here. . Section C. Computation of Public Support Percentage Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f)) . . . . . . . . . Public support percentage from 2018 Schedule A, Part III, line 15 . . . . . . . . . . . . . . . . .

Section D. Computation of Investment Income Percentage

Investment income percentage for **2019** (line 10c, column (f) divided by line 13, column (f)) . . . . . . 17

Investment income percentage from 2018 Schedule A, Part III, line 17 . . . . . . . . . . . . . . .

15

17

0 %

0 %

18 19a 331/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . . . . . . . . . . . .

Schedule A (Form 990 or 990-EZ) 2019

Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

10a

answer line 10b below.

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). 2

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination. 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. 3с

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or

4b supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by 5a amendment to the organizing document).

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5c Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6

supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) . 7

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

8 complete Part I of Schedule L (Form 990 or 990-EZ). 8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI. 9a

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Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
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than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

organization had an interest? If "Yes," provide detail in Part VI.

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

9b

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Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in
which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
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Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

	edule A (101111 330 01 330 E2) 2013			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			
		11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .	11c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-		
2	operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization.			
S	ection C. Type II Supporting Organizations			
_			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations		v	
_			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing			
	documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).			
_		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax			
	year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
•	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No
•	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
ı	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's			
	involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
•	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in <b>Part VI.</b> the role played by the organization in this regard.	3h		

3b

Schedule A (Form 990 or 990-EZ) 2019 Page 6 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 Add lines 1 through 3 4 4 5 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year): a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) **1**d e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt use assets 2 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see 4 instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by .035 6 6 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Current Year Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 4 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in <b>Part VI</b> ). See instructions	
7	Total annual distributions. Add lines 1 through 6.	
_		

7 Total annual distributions. Add lines 1 through 6.					
8 Distributions to attentive supported organizations to wh details in <b>Part VI</b> ). See instructions					
9 Distributable amount for 2019 from Section C, line 6	9 Distributable amount for 2019 from Section C, line 6				
10 Line 8 amount divided by Line 9 amount					
Section E - Distribution Allocations (see instructions)  (i) (ii) Underdistributions Pre-2019			(iii) Distributable Amount for 2019		
Distributable amount for 2019 from Section C, line 6					

9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in <b>Part VI</b> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2019:			
a From 2014			
<b>b</b> From 2015			
c From 2016			
<b>d</b> From 2017			
e From 2018			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years		·	
h Applied to 2019 distributable amount			

See instructions.		
Excess distributions carryover, if any, to 2019:		
a From 2014		
<b>b</b> From 2015		
c From 2016		
<b>d</b> From 2017 <b></b>		
e From 2018		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
<b>h</b> Applied to 2019 distributable amount		
i Carryover from 2014 not applied (see instructions)		
Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
Distributions for 2019 from Section D, line 7:		
¢ ·		

Schedule A (Form 990 or 990-EZ) (2019)

a Applied to underdistributions of prior years **b** Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4. **5** Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2020. Add lines

See instructions.

d Excess from 2018.

a Excess from 2015. . . . . **b** Excess from 2016. . . . . c Excess from 2017. . . . .

e Excess from 2019. . . . .

3j and 4c. 8 Breakdown of line 7:

Schedule A (	Form 990 or 990-EZ) 2019	age <b>8</b>
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).	
	Facts And Circumstances Test	
	tion B Line 10 col a - Other income includes gross income from fundraising events, not including contributions, of 36,647, and income ducational services of 28,282,347.	ne
990 Sched	lule A, Supplemental Information	

<u>J</u>	. ,			
90 Schedule A, Supplemental Information				
Return Reference	Explanation			
Part II Section B Line 10	col b - Other income includes gross income from fundraising events, not including contribu			

tions, of 26,692, and income from other educational services of 22,566,734.

90 Schedule A, Supplemental Information			
Return Reference	Explanation		
art II Section B Line 10	col c - Other income includes gross income from fundraising events, not including contribu		

990 Schedule A, Supplemental Information			
Return Reference	Explanation		
Dowt II Continu B Line 10	colld. Other income includes grees income from other educational convices of 10,940,239		

Part II Section B Line 10 col d - Other income includes gross income from other educational services of 19,849,228.

990 Schedule A, Supplemental Information			
Return Reference	Explanation		
Part II Section B Line 10	col e - Other income includes gross income from fundraising events, not including contribu		

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

**Political Campaign and Lobbying Activities** 

OMB No. 1545-0047

DLN: 93493137030751

Department of the Treasury Internal Revenue Service

EZ)

**SCHEDULE C** (Form 990 or 990-

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

▶Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

Open to Public Inspection

f the S o f f the	section 527 organizations: Complet organization answered "Yes" or section 501(c)(3) organizations that section 501(c)(3) organizations that	n Form 990, Part IV, Line 4, or Form 99 have filed Form 5768 (election under so have NOT filed Form 5768 (election un Form 990, Part IV, Line 5 (Proxy Tax s), then	90-EZ, Part VI, lir ection 501(h)): Co der section 501(h	ne <b>47 (Lobbying Activit</b> Implete Part II-A. Do not I): Complete Part II-B. D	ties), then complete Part II-B. Do not complete Part II-A.
Nan	ne of the organization HINGTON UNIVERSITY	·		Employer id	lentification number
				43-0653611	
Pari	I-A Complete if the organ	nization is exempt under sectio	n 501(c) or is	a section 527 orga	nization.
1	"political campaign activities")	ization's direct and indirect political cam		`	
2		itures (see instructions)			\$
3	Volunteer hours for political camp	aign activities (see instructions)			
		nization is exempt under sectio			
1		x incurred by the organization under se			\$
2	·	x incurred by organization managers ur			\$
3	If the organization incurred a sect	ion 4955 tax, did it file Form 4720 for t	his year?		🗌 Yes 🔲 No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV.  I-C Complete if the organ	nization is exempt under sectio	n 501(c) eve	ent section 501(c)(	3)
1		ed by the filing organization for section			\$
2	· ·	anization's funds contributed to other or	•		Ψ
	function activities			<b>&gt;</b>	\$
3	Total exempt function expenditure	es. Add lines 1 and 2. Enter here and on	Form 1120-POL,	line 17b ▶	\$
4	Did the filing organization file For	m 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments. For of political contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly delivere see (PAC). If additional space is needed,	ount paid from the ed to a separate p	filing organization's fun olitical organization, suc	ids. Also enter the amount
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fror filing organization's funds. If none, enter -0	contributions received
1					
2					
3					
4					
5					
<del></del>					

Grassroots lobbying expenditures

Return Reference

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(	a)	(b)	
ctivi		Yes	No	Amour	ıt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?			1	
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
			<u> </u>		
-	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	)(5), a	r secti	on Yes	N
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c)		or secti		N
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).		or secti	Yes	N
	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?			Yes 1 2 3	
ar	Were substantially all (90% or more) dues received nondeductible by members?	)(5), o		Yes 1 2 3 ion 501(c	
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?	  )(5), o		Yes 1 2 3 ion 501(c	
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	)(5), o		Yes 1 2 3 ion 501(c	
ar Par	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B  Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	)(5), o		Yes 1 2 3 ion 501(c	
ar ar b	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  LIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	)(5), o III-A		Yes 1 2 3 ion 501(c	
ar ar b	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  LIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	(5), o HII-A 2a 2b 2c		Yes 1 2 3 ion 501(c	
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.	)(5), o III-A		Yes 1 2 3 ion 501(c	)((
Par	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  LIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	(5), o HII-A 2a 2b 2c		Yes 1 2 3 ion 501(c	
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Till-B  Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	(5), o IIII-A 2a 2b 2c 3		Yes 1 2 3 ion 501(c	

Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -SCHEDULE D

DLN: 93493137030751

OMB No. 1545-0047

**Supplemental Financial Statements** ➤ Complete if the organization answered "Yes," on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Open to Public

Internal Revenue Service

(Form 990)

► Attach to Form 990. Department of the Treasury ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Name of the organization **Employer identification number** WASHINGTON UNIVERSITY 43-0653611 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year . . . . . . . . . 3 2 Aggregate value of contributions to (during year) 294,476 Aggregate value of grants from (during year) 42.062 Aggregate value at end of year . . . . . . . 17.373 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . . . . ✓ Yes □ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible ✓ Yes □ No **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year 2b Number of conservation easements on a certified historic structure included in (a) . . . . . 20 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year 🕨 Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . . . . . . . . . . . . . ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ☐ Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: 

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

**d** Equipment .

Sche	dule D	(Form 990) 2019										Page <b>2</b>
Par	t III	Organizations M	aintaining Col	lections of Art,	Histor	ical Treas	sures, or	Other	Similar As	<b>sets</b> (conti	nued)	
3		the organization's acq (check all that apply):		n, and other record	s, check	any of the	following t	hat are a	significant u	ise of its coll	ection	
а	✓	Public exhibition			d	<b>✓</b> Loa	n or excha	ange prog	grams			
b	<b>✓</b>	Scholarly research			e	<b>✓</b> Oth	nerEDUCA	ATION				
c	<b>✓</b>	Preservation for future	e generations									
4		de a description of the		lections and explai	n how th	ey further t	he organiz	ation's e	xempt purpo	se in		
5		g the year, did the org s to be sold to raise fur								☐ Yes	☑ N	0
Pa	rt IV	Escrow and Cust Complete if the or X, line 21.			orm 990	), Part IV,	line 9, or	r reporte	ed an amou	ınt on Form		
1a		organization an agent led on Form 990, Part								Yes	□ N	0
h	TE "Vo	s " ovalain the arrange	mont in Bart VIII	and complete the	following	table:	[		Λ	mount		_
b c		s," explain the arrangening balance		,	_		}	1c	A	inount		_
d	_	ons during the year .					ŀ	1d				_
e		butions during the year					l	1e				_
f		g balance						1f				_
		_					,					_
2a		ne organization include									☑ N	0
b		s," explain the arrange		. Check here if the	explanat	ion has bee	en provided	d in Part :	XIII	Ш		
Pa	rt V	Endowment Fund Complete if the ora		orod "Voc" on E	orm 000	) Dart IV	lino 10					
		Complete ii the or	gariizacion ansv	(a) Current year		Prior year	1	ears back	(d) Three yea	ars back (e) i	our year	rs back
<b>1</b> a	Beginni	ing of year balance .		8,130,482,491		,687,391,565	<del> </del>	14,957,840	<del> </del>	725,773		229,811
b	Contrib	outions		166,481,992	2	306,042,989	18	33,434,886	387,	873,106	264,5	592,352
С	Net inv	estment earnings, gair	ns, and losses	730,762,852	2	686,549,696	81	11,864,921	796,	318,420	-190,0	069,399
d	Grants	or scholarships		54,980,310	D	48,675,577	4	11,318,339	36,	592,062	32,8	350,645
	Other e	expenditures for facilition		374,343,079	9	439,804,651	41	15,005,825	396,	881,934	352,	169,079
f	Adminis	strative expenses .		83,203,738	3	61,021,531	6	56,541,918	62,	485,463	52,0	007,267
g	End of	year balance		8,515,200,208	3 8,	,130,482,491	7,68	37,391,565	7,214,	957,840	6,526,7	725,773
2	Provid	de the estimated perce	ntage of the curre	ent year end baland	e (line 1	g, column (	(a)) held a	s:	•			
а	Board	designated or quasi-e	ndowment ▶	36.000 %	•		. ,,					
b	Perma	anent endowment 🟲	64.000 %									
С	Temp	orarily restricted endo	wment ►									
-		ercentages on lines 2a	***************************************	Id equal 100%.								
3а		nere endowment funds ization by:	not in the posses	sion of the organiz	ation tha	t are held a	and admini	istered fo	r the		Yes	No
	(i) un	related organizations								3a(i)	Yes	
_		elated organizations .								3a(ii)		No
b		s" on 3a(ii), are the re								3b		
4		ibe in Part XIII the inte			owment	tunds.						
Pa	rt VI	Land, Buildings, Complete if the or			arm aar	) Dart T\/	line 11a	Sec For	rm 900 Pa	rt V lino 1	n	
	Descri	ption of property	(a) Cost or oth			basis (other			depreciation		ook value	e
		F. JpG/10/	(investme			Ç= -: / <del>=</del> /				(,		
1a	Land					178,355,81	.8				178	,355,818
		gs				4,814,311,36		2	197,146,807			,164,553
		old improvements				.,52.,511,50	-				_,017	,,
·	-ca2c11	ora umbroscurcura	l	[			1					

619,921,523

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

107,302,994

512,618,529

Complete if the organization answered "Yes"			
<ul><li>(a) Description of security or category (including name of security)</li></ul>	(b) Book value		d of valuation: -year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(A) Financial derivatives and other financial products			
(B) Closely-held equity interests	1 015 010 117		
(C) Absolute Return	1,015,840,117		F
(D) Private Equity	4,383,574,855		F
(E) Real assets and other	536,814,295		F
(F) Investment in affiliates	33,560,696		F
(G) Other investments	417,666,230		F
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)  Part VIII Investments—Program Related.	<b>▶</b> 6,387,456,193		_
Complete if the organization answered 'Yes'			
(a) Description of investment	t	(b) Book value	(c) Method of valuation: Cost or end-of-year market
(1)			value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		•	
Part IX Other Assets.  Complete if the organization answered 'Yes'	on Form 990, Part IV, line 1	1d. See Form 990, Pa	
(a) Descri	ription		(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	5.)		•
Part X Other Liabilities.  Complete if the organization answered 'Yes'	on Form 990. Part IV. line 1	1e or 11f.See Form	990. Part X. line 25.
1. (a) Descriptio			(b) Book value
(1) Federal income taxes			Value
(2) Federal income taxes (3) Deposits and advances			33,387,710
(4) Professional liability	91,493,269		
(5) Liabilities under split-interest agreements			38,689,531
(6) Government supported student loans (7) Rounding			22,670,914
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)		<b></b>	186,241,424
2. Liability for uncertain tax positions. In Part XIII, provide the t	text of the footnote to the organi		<del></del>

2

b

1

2

C

d

е 3

b

Part XIII

See Additional Data Table

4

5

Schedule D (Form 990) 2019

Page 4

-703,362,076

4,982,763,699

85,404,553

5,068,168,252

3,560,028,219

Other (Describe in Part XIII.) 2d -296,730,691

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Amounts included on Form 990, Part VIII, line 12, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b .

Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments . . . .

4

Donated services and use of facilities . . . . .

b

Add lines **4a** and **4b** . . . . . . . .

C

5

Donated services and use of facilities . .

Prior year adjustments . . . . . . Other losses . . . . . . . .

Add lines 2a through 2d .

Return Reference

Other (Describe in Part XIII.) . . . . .

Subtract line 2e from line 1 . . . . . . . . . . .

Add lines **4a** and **4b** . . . . . . . . . . . .

Supplemental Information

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Part XII

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . . . .

Total expenses and losses per audited financial statements . . . . .

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . . . . . . .

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part

4a 4b

> 2a 2b

> 2c

2d

4a

4b

Explanation

2a

2h

2c

85,404,553

85,404,553

291,826,412

-406.631.385

4c 5

2e

3

4c

5

3,560,028,219 377,230,965 3.937.259.184

chedule D (Form 990) 2019	Page <b>5</b>
Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2019

## **Additional Data**

**Software ID:** 19009610 **Software Version:** 19.2.1.0

**EIN:** 43-0653611

Name: WASHINGTON UNIVERSITY

## **Supplemental Information**

# Explanation

Return Reference II 9 The reported easement was assigned for ten dollars to the university concurrent with acqui sition of the property to which it applies. As such, it is not reported separately in the universitys revenue and expense statement, balance sheet or the footnotes to the financial statements.

Supplemental Information _							
Return Reference	Explanation						
III 1a	In addition to The Mildred Lane Kemper Art Museum, The university archives rare book colle ctions, works of Art, literary works, historical treasures and artifacts. These collection s are protected and preserved for public exhibition, education, research and the furtheran ce of public service. They are neither disposed of for financial gain nor encumbered in an y manner. Accordingly, such collections are not recognized or capitalized for financial st atement purposes.						

Supplemental Information	
Return Reference	Explanation
III 4	The Mildred Lane Kemper Art Museum dates back to 1881 with the founding of the St. Louis S chool of Museum of Fine Arts at Washington University. Its collection was formed in large part by acquiring significant works by artists of the time, a legacy that continues today. Now one of the finest university collections in the United States, the Museum contains st rong holdings of 19th-, 20th-, and 21st- century European and American paintings, sculptur es, prints, installations, and photographs. The collection also includes some Egyptian and Greek antiquities and more than 100 Old Master prints. The Museum is committed to preserv ing and developing its art collection and continuing its legacy of collecting significant art of the time providing excellence in art historical scholarship, education and exhibiti on inspiring social and intellectual inquiry into the connection between art and contempor ary life and engaging in audiences on campus, in the local community, across the nation, a nd worldwide. In addition to the Museum, the Libraries Department of Special Collections a rchives rare book collections, works of art, literary works, archival collections, histori cal treasures and artifacts. These collections are protected and preserved for public exhi bition education, research, and the furtherance of public service.

Supplemental Information	
Return Reference	Explanation
V 2c	During the FY19 reporting year, the university adopted the Financial Accounting Standards Board FASB Accounting Standards Update ASU 2016-14, Presentation of Financial Statements of Not-for-Profit Entities, which revises the not-for-profit reporting model. This guidance requires the university to reclassify its net assets i.e., previously unrestricted, tempo rarily restricted, and permanently restricted into two categories net assets with donor restrictions and net assets without donor restrictions. Per the instructions to the 990, the university has opted to leave the term endowment funds blank and has reported all endowed assets subject to donor-imposed restrictions on Line 2b. This is consistent with how the university reported endowed assets within the audited financial statements.

Supplemental Information	
Return Reference	Explanation
V 4	Washington Universitys endowment is an important financial resource that provides a meanin gful source of revenue for university programs and operations. This enduring support for p urposes as designated by donors, including scholarships, professorships, research efforts, libraries and capital projects, enables the university to attract and retain outstanding faculty and students.

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Supplemental Information	upplemental Information							
Return Reference	Explanation							
X 2	The university is exempt from federal income taxes under Section 501c3 of the Internal Rev enue Code except to the extent the university has unrelated business income, or consolidat ed for-profit affiliates incur taxes. The Tax Cuts and Jobs Act the Act was enacted on Dec ember 22, 2017. The Act impacts the university in several ways, including new excise taxes on executive compensation and net investment income, increases to unrelated business taxa ble income UBTI, changes to the net operating loss rules, repeal of the alternative minimu m tax AMT, and the computation of UBTI separately for each unrelated trade or business. Further, the Act reduces the U.S. federal corporate tax rate and federal corporate unrelated business income tax rate from 35 to 21. The overall impact of the Act remains uncertain a nd the full impact of the Act will not be known until further regulatory guidance is provided to assist the university with calculating income and excise tax liabilities. The unive rsity has made a reasonable estimate of the determinable effects of the enactment of the Act, including the effect of an amendment to the Act passed during fiscal year 2020 to exclude certain fringe benefts previously deemed to be taxable income, on existing deferred tax balances. These amounts are provisional, subject to change and not material to the unive rsitys consolidated financial statements. Management believes the university has no uncert ain tax positions that result in material unrecognized tax expense/benefits.							

Supplemental Information Return Reference Explanation Scholarships netted againest tuition fees 295,148,561, changes reclassification of split-i XI 2d Interest agreements 1.611,365 and 29,235 fundraising event expenses reclassification.

Supplemental Information Return Reference Explanation Scholarships netted against tuition fees 295,148,561, changes in uncollectible pledges res XII 4b erve 3,292,914 and 29,235 fundraising event expenses reclassification.

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493137030751 OMB No. 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Go to www.irs.gov/Form990EZ for the latest information. Inspection Department of the Treasury Namel Retherosganization **Employer identification number** WASHINGTON UNIVERSITY 43-0653611 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? . . . . . . . . . . . . . . . 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 4c Yes 4d Yes If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: 5a Nο **b** Admissions policies? . . . . . . . . 5b Νo c Employment of faculty or administrative staff? . 5c Νo **d** Scholarships or other financial assistance? . 5d Νo e Educational policies? . . 5e No f Use of facilities? . . 5f No **g** Athletic programs? . . . . . . 5g Νo 5h No If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. **6a** Does the organization receive any financial aid or assistance from a governmental agency? Yes 6a b Has the organization's right to such aid ever been revoked or suspended? . . . . . . . . . . . . . No If you answered "Yes" to either line 6a or line 6b, explain on Part II. 7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II. Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Cat. No. 50085D Schedule E (Form 990 or 990-EZ) (2019)

Schedule E (Form 990 or 990EZ) (2019) Page <b>2</b>						
<b>Part II</b> Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information. See instructions.						
Return Reference	Explanation					
6a	Washington University received funds from the Department of Education for the administration of campus-based student financial aid programs, including Perkins Loans, Pell Grants, SEOG Grants and federal work study funding. The State of Missouri provides similar funding.					
	Schedule E (Form 990 or 990-EZ) (2019)					

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493137030751 OMB No. 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2019 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. Open to Public ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** WASHINGTON UNIVERSITY 43-0653611 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance 2 outside the United States. 3 Activites per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the program service, describe for and investments employees, agents, region (by type) (such as, region and independent fundraising, program specific type of in the region service(s) in the region contractors in the services, investments, grants to recipients located in the region region) See Add'l Data 4,482,248,942 **3a** Sub-total . b Total from continuation sheets to Part I . . . 86 166 311,781,746 86 173 c Totals (add lines 3a and 3b) 4,794,030,688

Cat. No. 50082W

Schedule F (Form 990) 2019

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-

90 Schedule F (Form 990) 2019

ype of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other
See Add'l Data							,

Sche	dule F (Form 990) 2019		Page <b>4</b>
Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<b>✓</b> Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	<b>☑</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	<b>✓</b> Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	<b>⊻</b> Yes	□No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	<b>✓</b> Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).	<b>✓</b> Yes	□No

Schedule F (f	lule F (Form 990) 2019 Pag			
Part V Supplemental Information  Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to any additional information. See instructions.				
	ule F, Supplemental Information			
Return Reference	Explanation			
Part I Line 2	- The University maintains a formal policy defining its procedures for monitoring the use of sponsored funds by subrecipients who are performing a portion of a sponsored project externally awarded to the University. The policy provides guidance to ensure that subrecipients conduct their portions of a			

sponsored project in compliance with laws, regulations and terms and conditions of awards and subawards and that reimbursed costs incurred by subrecipients are allowed. The policy addresses the roles and responsibilities of the central offices and academic departments of the University and describes the monitoring procedures for each area. The full text of the Universitys Subrecipent Policy is available online at the following web address http://financialservices.wustl.edu/wfin-topic/sponsored-projects-accounting/.

990 Schedule F, Supplemental Information

balances owed by the student for tuition, fees and other educational expenses.

Return Reference	Explanation	ı
Part I Line 2	The grants reported in Part III are primarily scholarships to students. The use of scholarships is controlled by applying such amounts directly against	ı

990 Schedule F, Supplemental Information

Return Reference	Explanation
Part I Line 2	- The University does not keep records that identify the charitable status of subgrantees. Most subgrantees are universities, hospitals and research

990 Schedule F, Supplemental Information

Return Reference	Explanation
Part III Line 1-8	- Column e - Scholarships are awarded by crediting directly to the students account with the University.

### **Additional Data**

East Asia and the Pacific

Greenland

Europe Including Iceland and

**Software ID:** 19009610 **Software Version:** 19.2.1.0 **EIN:** 43-0653611

Name: WASHINGTON UNIVERSITY

### Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of	(c) Number of	(d) Activities conducted
	offices in the	employees or	in region (by type) (i.e.,
	region	agents in	fundraising, program
		region	services, grants to

7 Alumni Events

Alumni Events

conducted (e) If activity listed in (d)

recipients located in the region)

ype) (i.e.,

is a program service, describe specific type of

(f) Total expenditures for region

425,461

26,222

service(s) in region

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) Middle East and North Africa Alumni Events 3.412 North America Alumni Events 4,900

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) South America Alumni Events 378 Sub-Saharan Africa Alumni Events 300

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures in region (by type) (i.e., offices in the employees or is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Central America and the 18,700 Grantmaking Caribbean Grantmaking 1,163,799 East Asia and the Pacific

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures in region (by type) (i.e., offices in the employees or is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Europe Including Iceland and 5.101.844 Grantmaking Greenland Middle East and North Africa 269,354 Grantmaking

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) North America 697,915 Grantmaking Russia and the Neighboring Grantmaking 34,498 States

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) South America 656,460 Grantmaking South Asia Grantmaking 184,064

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Sub-Saharan Africa 2,666,507 Grantmaking Central America and the Investments 4.074,154,892 Caribbean

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Europe Including Iceland and 396,840,236 Investments Greenland North America 1,951,981 Investments

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) Sub-Saharan Africa 286,352,956 lInvestments East Asia and the Pacific Investment Activities 98,892

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Europe Including Iceland and Investment Activities 32,436 Greenland Middle East and North Africa 1,218 Investment Activities

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures in region (by type) (i.e., offices in the employees or is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) North America Investment Activities Russia and the Neighboring Investment Activities 2,142 States

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) South America Investment Activities 12,309 South Asia Investment Activities 13,117

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Sub-Saharan Africa Investment Activities 44,317 Central America and the Program Services Education 160,295 Caribbean

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) East Asia and the Pacific 39 Program Services Education 1.943.116 Europe Including Iceland and 48 Program Services Education 2,447,637 50 Greenland

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) Middle East and North Africa 11 | Program Services Education 625,012 North America 4 Program Services Education 109,752

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Russia and the Neighboring Program Services Education 5.931 States 191,979 South America 14 Program Services Education

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) South Asia 13 Program Services Education 316,279 Sub-Saharan Africa 17 Program Services Education 400,105

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Antarctica Program Services 5.356 lResearch Central America and the 2 Program Services Research 126,535 Caribbean

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) East Asia and the Pacific 1 | Program Services 1.562.961 lResearch Europe Including Iceland and Program Services Research 8,058,581 Greenland

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) Middle East and North Africa 339,309 IProgram Services Research North America 2 Program Services Research 1,003,285

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures in region (by type) (i.e., offices in the employees or is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Russia and the Neighboring Program Services 7.952 lResearch States 305,180 South America Program Services lResearch

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) South Asia 299,551 IProgram Services Research Sub-Saharan Africa 15 Program Services Research 3,530,544

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Central America and the Program Services Seminars, Conferences 63,539 Caribbean 334,326 East Asia and the Pacific Program Services Seminars, Conferences

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Europe Including Iceland and Program Services Seminars, Conferences 953,771 Greenland Middle East and North Africa 87,201 Program Services Seminars, Conferences

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) North America Program Services Seminars, Conferences 205.527 Russia and the Neighboring Program Services Seminars, Conferences 14,145 States

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) South America Seminars, Conferences 61,775 IProgram Services Seminars, Conferences South Asia Program Services 51,276

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of reaion agents in fundraising, program service(s) in region services, grants to reaion recipients located in the reaion) Sub-Saharan Africa Program Services Seminars, Conferences 61,446

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and RESEARCH 27,534 CHECK the Pacific East Asia and RESEARCH 44.740 WIRE TRANSFER

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and RESEARCH 14,920 WIRE TRANSFER the Pacific East Asia and RESEARCH 24.983 WIRE TRANSFER

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and RESEARCH 7,160 WIRE TRANSFER the Pacific East Asia and RESEARCH 39.970 WIRE TRANSFER

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and RESEARCH 9.945 WIRE TRANSFER the Pacific East Asia and RESEARCH 8.415 WIRE TRANSFER

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and RESEARCH 18,933 WIRE TRANSFER the Pacific East Asia and RESEARCH 7.160 WIRE TRANSFER

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and RESEARCH 46,317 WIRE TRANSFER the Pacific East Asia and RESEARCH 30.186 WIRE TRANSFER

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 18,182 WIRE TRANSFER RESEARCH |Europe Includina Iceland and Greenland RESEARCH 20.486 WIRE TRANSFER Europe Including Iceland and Greenland

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) RESEARCH 9,335 CHECK |Europe Includina Iceland and Greenland RESEARCH 6.053 WIRE TRANSFER Europe Including Iceland and

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 194,832 WIRE TRANSFER **IRESEARCH** Europe lIncludina Iceland and Greenland IRESEARCH 20.296 CHECK Europe Including Iceland and Greenland

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 3,238 CHECK RESEARCH |Europe Includina Iceland and Greenland RESEARCH 39.292 WIRE TRANSFER Europe Including Iceland and Greenland

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 7,542 WIRE TRANSFER **IRESEARCH** Europe lIncludina Iceland and Greenland IRESEARCH 123.458 WIRE TRANSFER Europe Includina Iceland and Greenland

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 4,750 WIRE TRANSFER RESEARCH |Europe Includina Iceland and Greenland RESEARCH 9.807 CHECK Europe Including Iceland and

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) RESEARCH 11,250 WIRE TRANSFER |Europe Includina Iceland and Greenland RESEARCH 26.200 CHECK Europe Including Iceland and

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 14,242 WIRE TRANSFER RESEARCH |Europe Includina Iceland and Greenland RESEARCH 57.774 CHECK Europe Including

Iceland and Greenland

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **IRESEARCH** 28,112 CHECK Europe lIncludina Iceland and Greenland IRESEARCH 179.418 CHECK Europe Including Iceland and

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) RESEARCH 15,838 CHECK |Europe Includina Iceland and Greenland RESEARCH 20.819 CHECK Europe Including Iceland and

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) RESEARCH 38,663 CHECK |Europe Includina Iceland and Greenland RESEARCH 7.914 CHECK Europe Including Iceland and

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 10,908 CHECK RESEARCH |Europe Includina Iceland and Greenland RESEARCH 7.802 CHECK Europe Including Iceland and

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) RESEARCH 81,628 CHECK |Europe Includina Iceland and Greenland RESEARCH 59.341 WIRE TRANSFER Europe Including Iceland and Greenland

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) **IRESEARCH** 415,288 CHECK Europe lIncludina Iceland and Greenland IRESEARCH 411.302 WIRE TRANSFER Europe Including Iceland and Greenland

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) RESEARCH 10,076 CHECK |Europe Includina Iceland and Greenland RESEARCH 15.432 WIRE TRANSFER Europe Including Iceland and Greenland

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) SPONSORSHIP 7.500 WIRE TRANSFER Europe lIncludina Iceland and Greenland SPONSORSHIP CREDIT CARD lEurope 500 Includina Iceland and

Greenland

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash cash grant organization and EIN(if grant non-cash disbursement assistance appraisal, applicable) assistance other) SPONSORSHIP 1.003 CREDIT CARD Europe lIncludina Iceland and Greenland Middle East and RESEARCH 64.228 WIRE TRANSFER

North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, non-cash cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East IRESEARCH 117.357 WIRE TRANSFER land North Africa Middle East ISPONSORSHIP 5.000 WIRE TRANSFER land North

Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) North America RESEARCH 12.526 WIRE TRANSFER North America RESEARCH 17,769 WIRE TRANSFER

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) North America RESEARCH 14.337 WIRE TRANSFER INorth America RESEARCH 372,265 WIRE TRANSFER

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) North America RESEARCH 5.150 WIRE TRANSFER North America RESEARCH 7,500 WIRE TRANSFER

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) North America RESEARCH 7.542 WIRE TRANSFER North America RESEARCH 18,455 WIRE TRANSFER

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) North America RESEARCH 65.610 WIRE TRANSFER North America RESEARCH 5,150 WIRE TRANSFER

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) North America RESEARCH 14.341 WIRE TRANSFER North America RESEARCH 1,342 WIRE TRANSFER

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) North America RESEARCH 12.938 WIRE TRANSFER North America RESEARCH 69,370 WIRE TRANSFER

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of I (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) North America RESEARCH 72.620 WIRE TRANSFER South America RESEARCH 84,873 WIRE TRANSFER

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia IRESEARCH 11.618 WIRE TRANSFER

South Asia RESEARCH 58,662 WIRE TRANSFER

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia IRESEARCH 30.904 WIRE TRANSFER

3,700 WIRE TRANSFER

South Asia

RESEARCH

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia IRESEARCH 33.829 WIRE TRANSFER

South Asia

RESEARCH

12,500 WIRE TRANSFER

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal. applicable) assistance other) South Asia SPONSORSHIP 100 CREDIT CARD Sub-Saharan **IRESEARCH** 15.966 WIRE TRANSFER Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan IRESEARCH 317,827 WIRE TRANSFER Africa Sub-Saharan RESEARCH 36,401 WIRE TRANSFER Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan IRESEARCH 3,998 WIRE TRANSFER Africa Sub-Saharan RESEARCH 110,637 WIRE TRANSFER Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan IRESEARCH 18,686 WIRE TRANSFER Africa Sub-Saharan RESEARCH 184,275 WIRE TRANSFER Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan RESEARCH 11,000 WIRE TRANSFER Africa Sub-Saharan RESEARCH 5.581 WIRE TRANSFER lAfrica

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan IRESEARCH 13,681 WIRE TRANSFER Africa Sub-Saharan RESEARCH 803,864 CHECK Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan IRESEARCH 151,011 WIRE TRANSFER Africa Sub-Saharan RESEARCH 17,280 WIRE TRANSFER Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan RESEARCH 29,505 CHECK Africa Sub-Saharan RESEARCH 5.457 CHECK Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan IRESEARCH 82,415 WIRE TRANSFER Africa Sub-Saharan RESEARCH 603,750 WIRE TRANSFER Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan RESEARCH 32,441 WIRE TRANSFER Africa Sub-Saharan RESEARCH 26.000 CHECK Africa

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (d) Amount of (e) Manner of cash (g) Description of (h) Method of (c)Number (f) Amount of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) SCHOLARSHIPS 18.700 | See Part V Central America and the Caribbean 34 SCHOLARSHIPS 858.818 | See Part V East Asia and the Pacific

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of (f) Amount of (g) Description of (h) Method of assistance cash grant cash disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) SCHOLARSHIPS 144 3,157,416 | See Part V lEurope Includina Iceland and Greenland SCHOLARSHIPS 82,769 | See Part V Middle East and North Africa

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S								
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)	
SCHOLARSHIPS	North America	1	34,498	See Part V				
	Russia and the Neighboring States	27	567,687	See Part V				

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) SCHOLARSHIPS 32,751 | See Part V South America SCHOLARSHIPS 195.733 | See Part V South Asia

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S								
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)	
FELLOWSHIPS	East Asia and the Pacific	4	9,952	Check				
FELLOWSHIPS	Europe Including Iceland and Greenland	16	33,334	Check				

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (q) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) FELLOWSHIPS 1,000 Check North America FELLOWSHIPS 1,000 Check South America

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) PRIZES AWARDS 24,517 Check East Asia and the Pacific PRIZES AWARDS 16 46.682 | Check Europe lIncludina Iceland and Greenland

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) PRIZES AWARDS 3,900 | Check South America

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493137030751 OMB No. 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. **Employer identification number** Name of the organization WASHINGTON UNIVERSITY 43-0653611 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants Internet and email solicitations ☐ Solicitation of government grants Phone solicitations ☐ Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col. (i) contributions? Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 50083H Schedule G (Form 990 or 990-EZ) 2019

	dule G (Form 990 or 990-EZ) 2019  rt III Fundraising Events. Comple	ete if the organization a	answered "Yes" on For	m 990, Part IV, line 18	Page 2 3, or reported more		
	than \$15,000 of fundraising e	vent contributions and					
	gross receipts greater than \$5	(a)Event #1	<b>(b)</b> Event #2	(c)Other events	(d) Total events		
			(3) 210.110 1/2	(d) deliver evening	(add col. (a) through		
		GOLF SCRAMBLE (event type)	(event type)	(total number)	col. <b>(c)</b> )		
		, ,,,	,,,,	,			
пe							
Revenue							
Re							
	1 Gross receipts	79,945			79,945		
	<b>2</b> Less: Contributions	62,361			62,361		
	<b>3</b> Gross income (line 1 minus line 2)	17,584			17,584		
	4 Cash prizes	300			300		
	5 Noncash prizes	300			300		
Ses							
Direct Expenses	_	13,290			13,290		
찣	7 Food and beverages	10,626			10,626		
ಭ	8 Entertainment						
ä	9 Other direct expenses	5,019			5,019		
	10 Direct expense summary. Add lines 4 t	through 9 in column (d)		•	29,235		
	11 Net income summary. Subtract line 10	from line 3, column (d)		<b>&gt;</b>	-11,651		
Par	t III Gaming. Complete if the orga	anization answered "Ye	s" on Form 990, Part I	V, line 19, or reported	more than \$15,000		
	on Form 990-EZ, line 6a.						
Reverue		(a) Bingo	<b>(b)</b> Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))		
eve			3 71 3 3				
ã	1 Gross revenue						
es	2 Cash prizes						
Direct Expense							
쯊	3 Noncash prizes						
ਲੂ	4 Rent/facility costs						
ă	5 Other direct expenses						
	5 Other direct expenses	☐ Yes %	☐ Yes %	☐ Yes %			
	<b>6</b> Volunteer labor	l <u> </u>	_	l <u> </u>			
	• Volunteer labor	∐ No	∐ No	∐ No			
	7 Direct expense summary. Add lines 2 t						
	8 Net gaming income summary. Subtrac	t line 7 from line 1 colum	n (d)				
					<u> </u>		
9	Enter the state(s) in which the organizati						
a b	Is the organization licensed to conduct gas If "No," explain:	☐ Yes ☐ No					
U	1 No, explain.						
10a	, , ,	☐ Yes ☐ No					
b	If "Yes," explain:						

Sche	dule G (Form 990 or 990-EZ) 20	19				F	age <b>3</b>					
11	Does the organization conduct	gaming activities with nonmembers	5?		Yes	Пио						
12	Is the organization a grantor, be formed to administer charitable		member of a partnership or other entity		Yes							
13	Indicate the percentage of gam	ning activity conducted in:										
а	The organization's facility .			13a			%					
b	An outside facility			13b			%					
14	Enter the name and address of	the person who prepares the organ	nization's gaming/special events books and	records:								
	Name ▶											
	Address >											
15a			m the organization receives gaming		·   Yes	Пио						
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$											
C	If "Yes," enter name and address of the third party:											
	Name •											
	Address ▶											
16	Gaming manager information:											
	Name ►											
	Gaming manager compensation ► \$											
	Description of services provided ▶											
	☐ Director/officer	☐ Employee	☐ Independent contractor									
17	Mandatory distributions:											
а	<u>-</u>		stributions from the gaming proceeds to		□Yes	Пио						
b	Enter the amount of distributio	ns required under state law distribu	ited to other exempt organizations or spent	:	☐ 1es							
		pt activities during the tax year										
Pai			ions required by Part I, line 2b, colum licable. Also provide any additional inf				s.					
	Return Reference		Explanation									

efile GRAPHIC print - DO NOT PROCESS As Filed Data 
Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I

(Form 990)

Department of the

Internal Revenue Service

Treasury

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

► Go to <u>www.irs.gov/Form990</u> for the latest information.

OMB No. 1545-0047

2019
Open to Public

DLN: 93493137030751

Inspection

WASHINGTON UNIVERSITY	SHINGTON UNIVERSITY									
Part I General Inform	ation on Grants	and Assistance				43-0653611				
Does the organization main the selection criteria used to	ntain records to sub	stantiate the amount of	the grants or assistance,	the grantees' eligibility	for the grants or assistanc	e, and	☑ Yes ☐ N			
2 Describe in Part IV the orga		_	_							
Part II Grants and Other I	<b>Assistance to Don</b> than \$5,000. Part II	nestic Organizations a can be duplicated if add	ind Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes"	on Form 990, Part IV, lin	e 21, for any recipient			
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance			
(1) See Additional Data										
(2)										
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Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Page 2

Schedule I (Form 990) 2019

Part III can be duplicated if additional space is needed.

(4) (5) (6)

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

**Return Reference** Explanation

(7) Part I Line 2 Part I Line 2 - The University maintains a formal policy defining its procedures for monitoring the use of sponsored funds by subrecipients who are performing a portion of a sponsored project externally awarded to the University. The policy provides guidance to ensure that subrecipients conduct their portions of a sponsored project in

compliance with laws, regulations and terms and conditions of awards and subawards and that reimbursed costs incurred by subrecipients are allowed. The policy addresses the roles and responsibilities of the central offices and academic departments of the University and describes the monitoring procedures for each area. The full text of the Universitys Subrecipent Policy is available online at the following web address http://financialservices.wustl.edu/wfin-topic/sponsored-projects-

laccounting/.

Part III Line 1 The grants reported in Part III line 1 are scholarships to students. The use of scholarships is controlled by applying such amounts directly against balances owed by the student for tuition, fees and other qualifying educational expenses. Part III Line 2 The grants reported in Part III line 2 are fellowships awarded to students who may use them to pay gualified educational expenses or to support their living expenses

while completing their course of study. The use of fellowship awards is not monitored by the University however an award is discontinued if the recipient student

discontinues his/her course of study.

Part III Line 3 Prizes and awards reported in Part III Line 3 are awarded to students or other individuals for, among other reasons, academic excellence, writing competitions, design

## **Additional Data**

ACADEMY OF NATURAL

SCIENCE OF DREXEL U 1900 BENJAMIN FRANKLIN

PHILADELPHIA, PA 191031195

PARKWAY

23-1352000

**Software ID:** 19009610 **Software Version:** 19.2.1.0

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**EIN:** 43-0653611

Name: WASHINGTON UNIVERSITY

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
3DUXDESIGN LLC 1555 WESTPORT TURNPIKE FAIRFIELD, CT 06824	82-2616644		20,000				AWARD				

RESEARCH

95,443

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) ADVOCATE HEALTH AND 26-2167770 E0102 10 0001 **IRESEARCH** 

HOSPITALS CORP 3075 HIGHLAND PARKWAY STE 600 DOWNERS GROVE, IL 60515	30-210///9	501C3	10,000			RESEAR
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ST LOUIS, MO 631063454

501C3 8.299 AFFINIA HEALTHCARE 43-0817642 IRESEARCH 1717 BIDDLE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 54-2127061 36.119 RESEARCH ALBERT EINSTEIN COLLEGE OF MEDICINE 1300 MORRIS PARK AVE VE

IRESEARCH

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Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BRONX, NY 10461
ALL CHILDRENS HOSPITAL

501 SIXTH AVENUE SOUTH ST PETERSBURG, FL 33701

59-2481742

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 36-6082049 501C3 5.150 SPONSORSHIP ALPHA OMEGA ALPHA 12635 E MONTVIEW BLVD STE

RESEARCH

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Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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270
AURORA, CO 80045

AMERICAN ACADEMY OF PEDIATRICS

72139 EAGLE WAY CHICAGO, IL 606787251 36-2275597

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) AMERICAN ASSOCIATION FOR 22-2387061 501C3 5.000 SPONSORSHIP AEROSOL RESEARCH

11130 SUNRISE VALLEY DRIVE SUITE 35 RESTON, VA 20191					
AMERICAN ASSOCIATION OF	36-2958324	501C3	5,000		SPONSORSHIP

NEUROSURGEONS 7550 EAGLE WAY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHICAGO, IL 606781075

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 74-1185665 501C3 7.575 SPONSORSHIP AMERICAN CANCER SOCIETY 4207 LINDELL BLVD 13-5613797 501C3 23.500 SPONSORSHIP

ST LOUIS, MO 63108	
AMERICAN HEART	
ASSOCIATION	

P O BOX 841750 DALLAS, TX 752841750

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 23-7036552 501C3 17.500 SPONSORSHIP AMERICAN SOCIETY FOR NEUROCHEMISTRY 9037 RON DEN LANE

WINDERMERE, FL 34786 AMERICAN SOCIETY FOR 04-2284338 501C3 5.000 SPONSORSHIP REPRODUCTIVE MEDI

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SPECIAL INTEREST GROUP BIRMINGHAM, AL 352162809

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) 26-4526340 501C3 25,000 SPONSORSHIP AMERICAN SOCIETY OF

1100 VERMONT AVENUE SUITE 650 WASHINGTON, DC 20005					
AMERICAN UNIVERSITY	53-0196549	501C3	11,663		RESEARCH

4400 MASSACHUSETTS AVE NW WASHINGTON, DC 200168066

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 43-1458163 501C3 5.000 SPONSORSHIP AMYOTROPHIC LATERAL

SCLEROSIS ASSOC 2258 WELDON PARKWAY ST LOUIS, MO 63146			·		
ARCH CITY DEFENDERS INC	80-0471494	501C3	21.200		SPONSORSHIP

LACLEDES LANDING SAINT LOUIS, MO 63102

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) 31-1611583 501C3 20.000 SPONSORSHIP AREA RESOURCES FOR

ARKANSAS CHILDRENS	71-0694931	501C3	133,714		RESEARCH
539 NORTH GRAND BLVD 5TH FL ST LOUIS, MO 63103					

RESEARCH INSTITUTE 13 CHILDRENS WAY LITTLE ROCK, AR 72202

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other)

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Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ST LOUIS, MO 63117

FOUNDATION 737 VILLA PLACE CT ST LOUIS, MO 63132	40-4440339	30103	12,200		3FONSORSHIP
ASTHMA & ALLERGY FOUNDATION OF AMERICA 1500 SOUTH BIG BEND Suite	43-1484316	501C3	5,000		SPONSORSHIP

12 2001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government BANNER HEALTH DBA BANNER 45-0233470 501C3 12,245 RESEARCH

SUN HEALTH RE 2901 N CENTRAL AVE STE 160 PHOENIX, AZ 85012					
BARNES JEWISH HOSPITAL	23-7309937	501C3	87.643		RESEARCH

4249 CLAYTON AVE STE 316 ST LOUIS, MO 63110

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) 74 464 2070 E0463 460 207 

MEDICINE 1 BAYLOR PLAZA BCM107C- 115C HOUSTON, TX 77030	74-1613878	501C3	468,397		RESEARCH
BETH ISRAEL DEACONESS	04-2103881	501C3	208,445		RESEARCH

BETH ISRAEL DEACONESS 04-2103881 MEDICAL CENTER 330 BROOKLINE AVE CLS-602

BOSTON, MA 02215

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) BETH ISRAEL MEDICAL 13-5564934 501C3 348 451 RESEARCH

SPONSORSHIP

CENTER				l
330 BROOKLINE AVE E/CLS				l
904				l
BOSTON, MA 022155491				l

77,500

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43-1346617

BETTER FAMILY LIFE INC.

5535 DELMAR BLVD ST LOUIS, MO 63112

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) BIOMEDICAL ENGINEERING 36-6212451 501C3 16.640 SPONSORSHIP

SPONSORSHIP

1,877,500

SOCIETY 8201 CORPORATE DR STE 1125 LANDOVER, MD 207852224			

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45-2137574

BIOSTL

7515 FORSYTH BLVD ST LOUIS, MO 63105

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 43-0654870 501C3 175.291 RESEARCH BJC HEALTHCARE 4444 FOREST PARK BLVD ST LOUIS, MO 63108 BLUEWILLOW BIOLOGICS FKA 20-5294469 23.054 RESEARCH

NANOBIO CORPO 2311 GREEN RD STE A

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ANN ARBOR, MI 481052965

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other)

SAN FRANCISCO, CA 94139

BOARD OF REGENTS OF THE	73-1563627	15,994		RESEARCH
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OKLAHOMA CITY, OK				
731260901				

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731260901

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LELAND STANFORD J
PO BOX 39000

RESEARCH

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(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 04-3314093 501C3 22,476 IRESEARCH BOSTON MEDICAL CENTER

CORP				
1 BOSTON MEDICAL CENTER				
BOSTON, MA 021182908				

P O BOX 2678

FLORISSANT, MO 63032

501C3 10.000 BREAKFAST CLUB INC. 43-1892689 SPONSORSHIP

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) BRIDGE INC 13-1919799 501C3 17.316 RESEARCH 290 LENOX AVE 3RD FLOOR BRIGHAM AND WOMENS 04-2312909 501C3 300.344 RESEARCH

NEW YORK, NY 10027 HOSPITAL 75 FRANCIS ST MC300 FENWAY R

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

BOSTON, MA 02115

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 26-3428781 501C3 17.642 RESEARCH BROAD INSTITUTE INC 415 MAIN STREET CAMBRIDGE, MA 02142 RESEARCH

BROOKINGS INSTITUTION 53-0196577 501C3 104.172 1775 MASSACHUSETTS AVENUE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

WASHINGTON, DC 20036

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) BUTLER HOSPITAL 05-0258812 501C3 123.650 RESEARCH 345 BLACKSTONE BLVD PROVIDENCE, RI 029064829 CALIFORNIA INSTITUTE OF 95-1643307 501C3 585.444 RESEARCH TECHNOLOGY

1200 E CALIFORNIA BLVD

PASADENA, CA 911098001

201-15

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) CALIFORNIA STATE 33-0397688 501C3 24,886 IRESEARCH

EAST

GRAPEVIEW, WA 985469200

UNIVERSITY SAN MARCOS 333 S TWIN OAKS VALLEY RD SAN MARCOS, CA 920960001				
CAMPBELL & ASSOCIATES CONSULTING 800 E STADIUM BEACH RD	82-4128473	16,400		RESEARCH

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 43-0738490 501C3 72.740 RESEARCH CARDINAL GLENNON CHILDRENS HOSPITAL 1465 SOUTH GRAND BLVD

CARNEGIE MELLON 25-0969449 501C3 42,936 RESEARCH UNIVERSITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

5000 FORBES AVENUE PITTSBURGH, PA 152133815

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government DRSHIP

CARVER PROJECT 231 WESTGATE AVENUE	82-2022974	501C3	7,500		SPONSOR
ST LOUIS, MO 63130					

ST LOUIS, MO 63103

CASA DE SALUD 27-0732049 501C3 37,250 SPONSORSHIP 3200 CHOUTEAU AVE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 34-1018992 501C3 955.407 RESEARCH CASE WESTERN RESERVE UNIVERSITY

9500 EUCLID AVENUE JJN5-01 CLEVELAND. OH 441950001 SPACE RENTAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ST LOUIS, MO 63130

CENTER OF CREATIVE ARTS 43-1395056 501C3 5.000 8.000 FMV SPONSORSHIP INC 524 TRINITY AVE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 72-0467503 501C3 49.574 RESEARCH CHILDRENS HOSPITAL 200 HENRY CLAY AVE NEW ORLEANS, LA 701185720

CHILDRENS HOSPITAL 04-2774441 501C3 29.262 BOSTON CORPORATION 333 LONGWOOD AVE 4TH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

RESEARCH FLOOR BOSTON, MA 021155711

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 31-0833936 501C3 113.756 RESEARCH CHILDRENS HOSPITAL MEDICAL CENTER 3333 BURNET AVE MI 7029 CINCINNATI. OH 45229

3333 BURNET AVE ML7029
CINCINNATI, OH 45229

CHILDRENS HOSPITAL OF 23-1352166 501C3 125,681
PHILADELPHIA 3615 CIVIC CENTER BLVD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PHILADELPHIA, PA 191044318

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government CHILDRENS MERCY HOSPITAL 44-0605373 501C3 400.809 IRESEARCH

& CLINIC 2401 GILLHAM ROAD KANSAS CITY, MO 64108				

ST LOUIS, MO 63103

CINEMA ST LOUIS 43-1613176 501C3 7.500 ISPONSORSHIP 3547 OLIVE STREET

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) CITY LINIT/EDCITY OF NEW 12-1760000 E0103 175 704 I DECEMBOL

YORK 205 E 42ND STREET NEW YORK, NY 100175706	13-1700098	30103	173,754		RESEARCH
COLD SPRING HARBOR LABORATORY ASSOC IN PO BOX 100	11-2013303	501C3	61,608		RESEARCH

COLD SPRING HARBOR, NY 11724

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance grant cash or assistance or government assistance other)

500 FAIRCHILD CENTER MC

NEW YORK, NY 10027

2401

COLORADO STATE UNIVERSITY 200 W LAKE STREET FORT COLLINS, CO 805214593	84-6000545	STATE OF CO	179,098		RESEARCH
COLUMBIA UNIVERSITY	13-5598093	501C3	1,293,202		RESEARCH

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 13-6031092 501C3 115.240 RESEARCH COLUMBIA UNIVERSITY 622 WEST 168TH STREET NEW YORK, NY 100323072

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

212

BLADENSBURG, MD 20710

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 20-0231080 84.005 RESEARCH CONSUMER WELLNESS SOLUTIONS INC 999 THIRD AVE SUITE 2000

SEATTLE. WA 981041139

ITHACA, NY 148537501

CORNELL UNIVERSITY 15-0532082 501C3 123.452 RESEARCH 410 GATES HALL

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) CORTEX 30-0082817 501C3 78.571 SPONSORSHIP 4678 WORLD PARKWAY

SPONSORSHIP

7.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CIRCLE ST LOUIS, MO 63134 CROHNS & COLITIS FOUNDATION OF AMERI

960 ACTIVE DR ST LOUIS, MO 63146 13-6193105

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) **CURATORS OF THE** 43-6003859 501C3 1,406,628 IRESEARCH

450 BROOKLINE AVENUE BOSTON, MA 022155450

DANA-FARBER CANCER INSTITUTE	04-2263040	501C3	62,433		RESEARCH
UNIVERSITY OF MISSOURI 115 BUSINESS LOOP 70W MIZZOU N COLUMBIA, MO 652110001					

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government ORSHIP

SPONSORSHIP

DELMAR DIVINE	82-5255262	501C3	1,250,000		SPONSO
130 South Bemiston Suite 303					
Clayton, MO 63105					

5.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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DOORWAYS

4385 MARYLAND AVENUE ST LOUIS, MO 63108

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 23-1352630 501C3 68.091 RESEARCH DREXEL UNIVERSITY 3201 ARCH STREET SUITE 420 I PHILADEPHIA, PA 19104

651,883

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

DUKE UNIVERSITY

BOX 90338 DURHAM, NC 27708

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 81-4458040 501C3 25.000 SPONSORSHIP EAST LOOP COMMUNITY IMPROVEMENT DIST 6150A DELMAR BLVD SUITE

108.507

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ST LOUIS, MO 63112 EMORY UNIVERSITY

1390 OXFORD RD NE 3FL ATLANTA, GA 303221016

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other)

ATLANTA 3225 CUMBERLAND BLVD ATLANTA, GA 303395971			7,73		
FASHION FOOTWEAR CHARITABLE FOUNDATION 232 MADISON AVENUE SUITE	13-4112482	501C3	75,000		SPONSORSHIP

8.795

1407 NEW YORK, NY 10016

58-1129515

EYE CONSULTANTS OF

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government EEINCTEIN INCTITUTE EOD 11-2672505 E0103 6 0001 I DECEMBOL

LEINSTEIN INSTITUTE FOR	11-20/3393	30103	0,000		INESEARCH
MEDICAL RESEAR					
350 COMMUNITY DRIVE					
MANHASSET, NY 110303816					

83-2000048 501C3 5.000 FESTABILITY ISPONSORSHIP 133 S 11TH STREET SUITE 500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ST LOUIS, MO 63102

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government RSHIP

**LAWARD** 

FOOD OUTREACH INC 3117 OLIVE ST	43-1492878	501C3	8,000		SPONSOR
ST LOUIS, MO 63103					

20,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

FOODSHARE LLC 47-2162094

4579 LACLEDE AVE UNIT 475 ST LOUIS, MO 63108

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government FORTE FOUNDATION 61-1457145 501C3 11 000 SPONSORSHIP

9600 ESCARPMENT 745 PMB 72 AUSTIN, TX 78749	01 143/143	30103	11,000		31 011301(311
FREEMAN HEALTH SYSTEMS	43-1704371	501C3	19.938		RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

FREEMAN HEALTH SYSTEMS 1102 WEST 32ND STREET

JOPLIN, MO 648043599

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 83-2206585 501C3 10.000 SPONSORSHIP GATEWAY HIGHER EDUCATION CYBERSECURITY 1 BROOKINGS DRIVE

ST LOUIS, MO 63130

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

St Louis, MO 63141

GATEWAY TO HOPE 20-2737792 501C3 8.000 SPONSORSHIP 845 North New Ballas Court

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) 23-6291113 501C3 153.883 RESEARCH GEISINGER CLINIC AKA GEISINGER HEALTH 100 NORTH ACADEMY AVENUE DANVILLE, PA 178223069 45-2540158 93.858 RESEARCH

GENECENTRIC THERAPEUTICS INC 4401 RESEARCH COMMONS STE 105

RESEARCH TRIANGLE, NC 27709

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 04-2697983 501C3 1.709.805 RESEARCH GENERAL HOSPITAL CORP DBA MASSACHUSETT 65 LANDSDOWNE ST RM 529 CAMBRIDGE, MA 02139

21.058

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

53-0196584 501C3 GEORGE WASHINGTON UNIVERSITY

2300 I STREET NW ROOM 725 WASHINGTON, DC 20037

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 53-0196603 501C3 113.917 RESEARCH GEORGETOWN UNIVERSITY 2121 WISCONSIN AVENUE STE 400

546.264

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

400 WASHINGTON, DC 200571164 GEORGIA STATE UNIVERSITY RESEARCH FDN

ATLANTA, GA 303023999

PO BOX 3999

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) 58-0603146 501C3 26.027 RESEARCH GEORGIA TECH RESEARCH CORPORATION

82.673

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

512 MEANS STREET SUITE 250 ATLANTA, GA 30318	
ATLANTA, GA 30316	
GINER INC	04-25298

89 RUMFORD AVENUE NEWTON, MA 024661311

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) 26 04 50662 E0463 7 000 SPONSORSHIP

CONFERENCES 512 LIBERTY LANE WEST KINGSTON, RI 02892	26-0150662	501C3	7,000		SPONSORSHIP
GRAND CENTER INC	43-1450326	501C3	5,000		SPONSORSHIP

3526 WASHINGTON AVE ZND FI OOR

SAINT LOUIS, MO 63103

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) GREAT RIVERS 43-1943334 501C3 7.250 SPONSORSHIP ENVIRONMENTAL LAW CENTER I

SPONSORSHIP

500.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

319 N 4TH ST SUITE 800 ST LOUIS, MO 63102 GREAT RIVERS GREENWAY FOUNDATION

6178 DELMAR BLVD ST LOUIS, MO 63112

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 39-1249705 501C3 8.0001 RESEARCH GUNDERSEN LUTHERAN MEDICAL FOUNDATION 1900 SOUTH AVENUE MS ALEX

1,129,495

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

LA CROSSE, WI 54601
HARVARD UNIVERSITY

677 HUNTINGTON AVE BOSTON, MA 021156028

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 47-1545141 501C3 5.000 SPONSORSHIP HAWTHORN LEADERSHIP SCHOOL FOUNDATION 1901 N KINGSHIGHWAY BLVD

ST LOUIS. MO 63113 04-2104298 501C3 378.988 HEBREW REHABILITATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

BOSTON, MA 021311097

RESEARCH CENTER FOR AGED 1200 CENTRE STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 41-1677920 501C3 42.852 RESEARCH HENNEPIN HEALTHCARE RESEARCH INSTITU

701 PARK AVENUE MINNEAPOLIS, MN 55415

5.713

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

HENRY FORD HEALTH SYSTEM 2799 WEST GRAND BLVD 542

DETROIT, MI 48202

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other)

HENRY M JACKSON FOUNDATION 6720 A ROCKLEDGE DR STE 100 BETHESDA, MD 20817	52-1317896	501C3	102,242		RESEARCH
HERBERT HOOVER BOYS &	43-6061693	501C3	5.000		SPONSORSHIP

5,000 GIRLS CLUB 2901 N GRAND AVE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ST LOUIS, MO 63107

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) HILLEL FOUNDATION 19-4386553 149.372 SPONSORSHIP 6300 FORSYTH BLVD

ST LOUIS, MO 63105

HISPANIC CHAMBER OF 43-1323271 501C6 8,500

SPONSORSHIP

COMMERCE
3611 SOUTH GRAND BLVD STE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SAINT LOUIS, MO 63118

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government HIVE MEDICAL INC 84-3730514 25.000 IAWARD

4340 DUNCAN AVE SUITE 241 ST LOUIS, MO 63110					
HOPE HAPPENS 101 S HANLEY ROAD SUITE 1320	20-2523211	501C3	5,400		SPONSORSHIP

ST LOUIS, MO 63105

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) HOUSE CLINIC 95-2638195 23.134 RESEARCH 2100 W THIRD STREET LOS ANGELES, CA 900571999 35-6001673 501C3 401.589 IRESEARCH

INDIANA UNIVERSITY
1001 EAST 3RD STREET MB
A20
BLOOMINGTON, IN

474057005

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 42-6004224 STATE OF IA 178.020 RESEARCH IOWA STATE UNIVERSITY 2221 WANDA DALEY DR 23-7203666 501C3 162.266 RESEARCH

AMES.IA 500111004 1 DAVID GLADSTONE INSTITUTES 1650 OWENS ST

SAN FRANCISCO, CA 941582261

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government JACKSON LABORATORY 01-0211513 501C3 127,368 IRESEARCH

610 MAIN STREET BAR HARBOR, ME 046091500					
JEWISH AGENCY FOR ISRAEL NORTH AMERICA 633 3RD AVE 21ST FLOOR	23-0053483	501C3	5,000		SPONSORSHIP

NEW YORK, NY 10017

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government

JOHNS HOPKINS UNIVERSITY 3910 KESWICK RD SUITE C220 BALTIMORE, MD 212110000	52-0595110	501C3	434,594		RESEARCH
JOSLIN DIABETS CENTER INC	04-2203836	501C3	76.854		RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1 JOSLIN PLACE BOSTON, MA 022155306

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government JUNIATA COLLEGE 23-1352652 501C3 8.654 IRESEARCH

1700 MOORE ST HUNTINGDON, PA 166522196			.,		
JUVENILE DIABETES RESEARCH FOUNDATION	23-1907729	501C3	5,000		SPONSORSHIP

432 PARK AVE SOUTH NEW YORK, NY 101570706

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) KALOCYTE INC 81-1564490 44.771 RESEARCH 4320 FOREST PARK AVE STE

87.860

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

304 ST LOUIS, MO 63108 KANSAS CITY UNIVERISTY MEDICAL CENTER

3901 RAINBOW BLVD MS 1039 KANSAS CITY, KS 661032937

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 43-0967292 501C3 20,000 IRESEARCH KC CARE HEALTH CENTER

3515 BROADWAY BLVD KANSAS CITY, MO 64111					
KELLSIES HOPE FOUNDATION INC	45-2623772	501C3	5,000		SPONSORSHIP

1021 ROBERT DRIVE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

MARYVILLE, IL 62062

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 01-0916759 501C3 51.000 SPONSORSHIP KIPP ST LOUIS 1310 PAPIN ST SUITE 203 ST LOUIS, MO 63103 LA JOLLA INSTITUTE FOR 33-0328688 501C3 346.820 IRESEARCH

ALLERGY IMMUN 9420 ATHENA CIRCLE

LA JOLLA, CA 92037

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government LEUKEMIA AND LYMPHOMA 13-5644916 50103 5 0001 ISPONSORSHIP

LECKET IN CAUSE LITTLE TO THE	13 30 1310	1 301031	3,000		1010110
SOCIETY			·		
77 WEST PORT PLAZA					
ST LOUIS, MO 63146					
LITTLE BIT FOUNDATION	20-0126713	501C3	55.693		RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

516 HANLEY INDUSTRIAL CT BRENTWOOD, MO 63144

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 27-1287287 STATE OF LA 129.017 RESEARCH LOUISIANA HEALTH CARE CONNECTIONS INC BATON ROUGE, LA 70809

8585 ARCHIVES AVE STE 310 72-6000848 501C3 1.104.143 RESEARCH LOUISIANA STATE UNIVERSITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

6400 PERKINS ROAD

BATON ROUGE, LA 708038434

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 51-0192362 501C3 5.800 SPONSORSHIP LUPUS FOUNDATION OF AMERICA

SPONSORSHIP

20.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

4640 SHENANDOAH AVENUE ST LOUIS, MO 63110 MARCH OF DIMES

POB 932852 ATLANTA, GA 31193

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 52-1265361 501C3 12,500 SPONSORSHIP MARFAN FOUNDATION INC

PORT WASHINGTON, NY 11050				
MARSHFIELD CLINIC	39-0452970	501C3	322.948	

1000 N OAK AVENUE MARSHFIELD, WI 54449 39-0452970 501C3 322.948

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

RESEARCH

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government RCH

MAYO CLINIC PO BOX 4006 ROCHESTER, MN 55905	41-6011702	501C3	815,532		RESEAR
MAYO FOUNDATION	59-3337028	501C3	465,051		RESEAR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

4500 SAN PABLO ROAD JACKSONVILLE, FL 322241865

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 57-6000722 501C3 6.498 IRESEARCH MEDICAL UNIVERSITY OF

SOUTH CAROLINA 19 HAGOOD AVE SUITE 805 CHARLESTON, SC 294258040				
MEDTRONIC NAVIGATION INC	84-1295737	53.240		RESEARCH

MEDTRONIC NAVIGATION INC 826 CORAL CREEK CIRCLE

LOUISVILLE, CO 80027

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 02-0641248 501C3 5.000 SPONSORSHIP MEMORY CARE HOME SOLUTIONS

SOLUTIONS
4389 WEST PINE BLVD
ST LOUIS, MO 63108

MERCY COLLEGE 13-1967321 501C3 7.578

RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

555 BROADWAY

DOBBS FERRY, NY 105221134

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) 43-1604756 501C3 5,000 SPONSORSHIP METROPOLITAN ST LOUIS

1027 S VANDEVENTER AVE 6TH FL ST LOUIS, MO 63110					
MICHIGAN STATE UNIVERSITY 301 ADMINISTRATION	38-6005984	501C3	151,494		RESEARCH

FOLIAL HOLICTMC

EAST LANSING, MI 48824

BUILDING

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other)

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MIGRANT & IMMIGRANT COMMUNITY ACTION	45-3236640	501C3	15,000		SPONSORSHIP
1600 S KINGSHIGHWAY BLVD SUITE 2N					
ST LOUIS, MO 63110					

SPONSORSHIP

102,926

ST LOUIS, MO 63110

MISSOURI BOTANICAL
GARDEN
PO BOX 299

ST LOUIS, MO 631660299

43-0666759

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) MISSOURI CURES EDUCATION 27-0576111 501C3 10.000 SPONSORSHIP FOUNDATION PO BOX 16580 ST LOUIS, MO 63105 MISSOURIANS FOR 84-2480884 250.000 SPONSORSHIP

HEALTHCARE

3220 W Edgewood Ste E Jefferson City, MO 65109

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 13-6171197 501C3 378.443 RESEARCH MOUNT SINAI SCHOOL OF MEDICINE ONE GUSTAVE LEVY PLACE

MEDICINE
ONE GUSTAVE LEVY PLACE
NEW YORK CITY, NY 10029

MUNICIPAL THEATRE 43-0662485 501C3 5,500

SPONSORSHIP
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Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1 THEATRE DRIVE SAINT LOUIS, MO 63112

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) NAFSA ASSOCIATION OF 13-1878953 501C3 10.000 SPONSORSHIP INTERNATIONAL EDU PO BOX 79159 BALTIMORE, MD 212790159 NATIONAL ACADEMY OF 53-0196932 501C3 25.000 SPONSORSHIP

SCIENCES

500 FIFTH STREET NW WASHINGTON, DC 20001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) NATIONAL ASSOCIATION FOR 43-6073999 501C4 5,000 SPONSORSHIP THE ADVANCEM

WASHINGTON, DC 20005

PO BOX 23455 ST LOUIS, MO 63156					
NATIONAL ASSOCIATION OF COUNTY & CITY 1100 17TH STREET NW 7TH FLOOR	52-1426663	501C3	18,121		RESEARCH

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) NATIONAL ASSOCIATION OF 62-1312239 501C3 5.050 SPONSORSHIP HEALTH SERVICE P O BOX 759204 BALTIMORE, MD 212759204

RESEARCH

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Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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NATIONAL CONGRESS OF

AMERICAN INDIANS 1516 P STREET NW WASHINGTON, DC 20005 53-6017907

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) NIATTONIAL LILIMANITTEC E0 1725267 EA1C2 10.000 CDONCODCUID

NATIONAL INDIAN CHILD	03-0051531	50103	5 125		DESEADOU
CENTER P O BOX 12256 RESEARCH TRIANGLE, NC 277092256	59-1/3536/	501C3	10,000		SPONSORSHIP

NATIONAL INDIAN CHILD 93-0951531 201631 5,125 IKESEAKCH WELFARE ASSOC 5100 SW MACADAM AVE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PORTLAND, OR 972390000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) NATIONWIDE CHILDRENS 31-4379441 501C3 8.222 RESEARCH HOSPITAL INC COLUMBUS CHILDRENS

IRESEARCH

HOSPITAL COLUMBUS, OH 432057696

49.459

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

NEMOURS FOUNDATION

13535 NEMOURS PARKWAY ORLANDO, FL 32827

59-0634433

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 81-5035874 501C3 10.000 SPONSORSHIP NEONATAL HEART SOCIETY

455 CAPITOL MALL COMPLEX STF 217 SACRAMENTO, CA 95814

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NEW YORK, NY 10016

NEW YORK UNIVERSITY 13-5562308 501C3 521.858 RESEARCH 430 EAST 29TH ST ROOM 316

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) NEW YORK UNIVERSITY 13-5562309 501C3 187,304 IRESEARCH

825

SILVER SPRING, MD 20910

MEDICAL CENTER PO BOX 418910 BOSTON, MA 02241					
NORTH AMERCAN SOCIETY FOR PSYCHOSOCIAL 1100 WAYNE AVENUE SUITE	38-2653043	501C3	10,000		SPONSORSHIP

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) 56-6000756 STATE OF NC 299.297 RESEARCH NORTH CAROLINA STATE LINTVERSITY

BOX 7621 RALEIGH, NC 27695					
NORTHEAST AMYOTROPHIC LATERAL SCLEROSI 177 E COLORADO BLVD STE	56-2547779	501C3	5,000		SPONSORSHIP

200

PASADENA, CA 91105

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 86-6004791 STATE OF AZ 35.579 RESEARCH NORTHERN ARIZONA UNIVERSITY 1395 S KNOLES DR FLAGSTAFF, AZ 860114130

RESEARCH

984.602

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

NORTHWESTERN UNIVERSITY

2145 N SHERIDAN RD EVANSTON, IL 60208 36-2167817

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) NRG ONCOLOGY FOUNDATION 90-0912747 501C3 115.796 RESEARCH INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

7259 LANSDOWNE ST LOUIS, MO 63119

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 31-6025986 501C1 1.466.563 RESEARCH OHIO STATE UNIVERSITY 650 ACKERMAN RD ROOM 334 COLUMBUS, OH 43202 OHIO STATE UNIVERSITY 31-6401599 501C3 6.315 RESEARCH RESEARCH FOUNDAT 1060 CARMACK 055 RIGHTMIRE HALL

COLUMBUS, OH 43210

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) OREGON HEALTH & SCIENCE 93-1176109 501C3 243 907 RESEARCH

530 NE GLEN OAK AVE ROOM

4650

PEORIA, IL 61637

UNIVERSITY 3181 SW SAM JACKSON PARK ROAD PORTLAND, OR 97239	33-1170103	30163	243,307		RESEARCH
OSF HEALTHCARE SYSTEM	37-0813229	501C3	27.200		RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 94-2340692 501C3 166.807 RESEARCH PACIFIC GRADUATE SCHOOL OF PSYCHOLOGY 77-0207331 501C3 23.648 RESEARCH

1791 ARASTRADERO ROAD PALO ALTO, CA 943041337 PALO ALTO INSTITUTE FOR RESEARCH AND E

3801 MIRANDA AVENUE PALO ALTO, CA 94304

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 23-7112449 501C3 31.259 RESEARCH PARAOUAD INC 5240 OAKLAND AVENUE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2228 BALL DRIVE ST LOUIS, MO 631468602

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance or assistance organization if applicable grant cash or government assistance other) PARK CENTRAL DEVELOPMENT 37-1427044 501C3 20.000 SPONSORSHIP CORPORATION 4512 MANCHESTER AVENUE SUITE 100

SAINT LOUIS, MO 63110

PHILADELPHIA, PA 191412987

PATHWAYS TO HOUSING PA 45-2612118 501C3 11,282 IRESEARCH 5201 OLD YORK RD STE 108

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) PEDAL THE CAUSE 27-2233336 501C3 17 275 SPONSORSHIP

900 SPRUCE STREET SUITE 125 ST LOUIS, MO 63102	27-223330	30103	17,273		TSF ONSORSIT
PENNSYLVANIA STATE UNIVERSITY 227 W BEAVER AVE STE 401	24-6000376	501C3	464,784		RESEARCH

STATE COLLEGE, PA 168014819

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government PORTLAND VA RESEARCH 94-3090170 501C3 aa zanl RESEARCH

FOR EARD VA RESEARCH	34-30301/U	30103	33,230		INFORMICH
FOUNDATION					
PO BOX 19832					
PORTLAND, OR 972800832					

6665 DELMAR BLVD SUITE 300 ST LOUIS, MO 63130

501C3 PREPARE AT 82-2714443 15.000l SPONSORSHIP

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government CH

PRESERVE SOUTH INC 5023 B U BOWMAN DRIVE	82-3951643	32,130		RESEARC
BUFORD, GA 30518				

3738 CHOUTEAU AVE ST LOUIS, MO 63110

501C3 7.200 SPONSORSHIP PRIDE ST LOUIS INC 43-1331630

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 21-0634501 501C3 14.411 RESEARCH

PRINCETON UNIVERSITY 4 NEW SOUTH BLDG BOX 36 PRINCETON, NJ 08544

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ST LOUIS, MO 631433025

PROJECT PEANUT BUTTER 59-3785405 501C3 274.241 IRESEARCH 7435 FLORA AVENUE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 66-0433762 25.392 RESEARCH RECINTO DE CIENCIAS MEDICAS PO BOX 365067 95-2226406 501C3 246.748 RESEARCH

## SAN JUAN, PR 009365067 REGENTS OF THE UNIVERISTY OF CALIFORNI

**B321 CROUL HALL** IRVINE, CA 926973100

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) DECENTE OF THE HINTVEDCITY OF CODC+44 EA1C2 1 012 405 IDECEADOL

OF CALIFORNI 9500 GILMAN DRIVE 0553 RADY LA JOLLA, CA 92093	95-6006144	501C3	1,012,495		RESEARCH
REGENTS OF THE UNIVERSITY	94-1539563	501C3	249,543		RESEARCH

OF CALIFORNI 1156 HIGH STREET

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SANTA CRUZ, CA 950601077

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) REGENTS OF THE UNIVERSITY 94-6602123 501C3 217.949 RESEARCH

OF CALIFORNI UNIVERSITY OFFICE BLDG 200 RIVERSIDE, CA 92521 REGENTS OF THE UNIVERSITY 94-6002123 501C3 199.614 RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

OF CALIFORNI 101 HAVILAND HALL

BERKELEY, CA 947107358

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) REGENTS OF THE UNIVERSITY 95-6006145 501C3 197.346 RESEARCH OF CALIFORNI

9510 UNIVERSITY OF CALIFORNIA SANTA BARBARA, CA 931069510 REGENTS OF THE UNIVERSITY 38-6006309 501C3 1.033.180 RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

OF MICHIGAN 3003 STATE STREET ANN ARBOR, MI 481091271

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) REGENTS OF THE UNIVERSITY 41-6007513 501C3 2,077,661 IRESEARCH

OF MINNESOTA 222 21ST AVENUE SOUTH MINNEAPOLIS, MN 554550439					
REGIONAL UNION	20-5160448	501C3	5,000		SPONSOR

ST LOUIS, MO 63177

DRSHIP PO BOX 771091

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 36-2256036 501C3 35.772 RESEARCH REHABILITATION INSTITUTE OF CUITCACO

SPONSORSHIP

17.500l

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501C3

OF CHICAGO	
355 EAST ER	IE STREET
CHICAGO, IL	60611316

RENEW MISSOURT 409 VANDIVER DR 5-205 COLUMBIA, MO 65202

81-3229949

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 14-1410842 501C3 644.530 RESEARCH RESEARCH FOUND FOR MENTAL HYGIENE INC 1051 RIVERSIDE DRIVE

NEW YORK, NY 100321007 RESEARCH FOUNDATION OF 14-1368361 501C3 105.371 RESEARCH STATE UNIVERSIT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

402 CROFTS HALL BUFFALO, NY 142607003

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) RESEARCH FOUNDATION OF 13-1988190 501C3 43,418 IRESEARCH

THE CITY UNIVER 230 WEST 41ST STREET NEW YORK, NY 100367207					
RESEARCH INSTITUTE AT NATIONWIDE CHILD 700 CHILDRENS DR RM	31-6056230	501C3	136,284		RESEARCH

WA1300 COLUMBUS, OH 43205

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) RESEARCH TRIANGLE 56-0686338 501C3 11.338 RESEARCH INSTITUTE

3040 CORNWALLIS ROAD RESEARCH TR PARK, NC 277092194

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

HOUSTON, TX 772511892

RICE UNIVERSITY 74-1109620 501C3 152.273 IRESEARCH PO BOX 1892

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 43-1611669 501C3 7.500l SPONSORSHIP RISE COMMUNITY DEVELOPMENT

RESEARCH

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Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

DEVELORITIES	
611 OLIVE ST SUITE 1641	
SAINT LOUIS, MO 63101	
ROCKEFELLER UNIVERSITY	,

950 THIRD AVENUE NEW YORK, NY 10022 13-1624158

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other)

FUSZ MEMORIAL HALL ROOM

ST LOUIS, MO 631083306

380

RUTGERS STATE UNIVERSITY OF NEW JERSEY 145 BEVIER RD BUSINESS OFFICE PISCATAWAY, NJ 08854	22-6001086	501C3	151,600		RESEARCH
SAINT LOUIS UNIVERSITY	43-0654872	501C3	831,434		RESEARCH

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) 95-6042721 501C3 146.659 RESEARCH SAN DIEGO STATE UNIVERSITY

5250 CAMPANILE DR MC 1947 SAN DIEGO, CA 921821947					
SANFORD BURNHAM MEDICAL RESEARCH INSTI 10901 NORTH TORREY PINES ROAD	51-0197108	501C3	816,556		RESEARCH

LA JOLLA, CA 92037

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) SCRIPPS RESEARCH 33-0435954 501C3 8.297 IRESEARCH

RESEARCH

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AGEEG MODELL TORRES ARMES					1
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ROAD					1
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LA JOLLA, CA 92037	1	1	1	I	I

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Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SICKLE CELL ASSOCIATION

FLORISSANT, MO 630322751

PO BOX 2751

36-4713585

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government STMMONS COLLEGE 04-2103629 501C3 38.086l RESEARCH 300 THE FENWAY

SPONSORSHIP

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Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

BOSTON, MA 02115 SLING HEALTH

20 S SARAH STREET ST LOUIS, MO 63108

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) SOCIETY FOR INVESTIGATIVE 23-1361165 501C3 10.000 SPONSORSHIP DERMATOLOGY

2074 ABINGTON ROAD CLEVELAND, OH 44106				
SOCIETY OF PROFESSORS EMERITI ATTN TREASURER WILHELM	46-2211321	15,000		SPONSORSHIP

NEUEFEIND ST LOUIS, MO 63130

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) SOUTH FLORIDA BEHAVIORAL 59-3380599 501C3 24.756 RESEARCH 7205 CORPORATE CENTER DR 200

MIAMI, FL 331261216 SOUTHERN ILLINOIS 37-0618939 501C3 54.302 RESEARCH HEALTHCARE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1239 EAST MAIN ST CARBONDALE, IL 629020000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 74-1109630 501C3 712.182 RESEARCH SOUTHWEST FOUNDATION FOR BIOMED RES

RESEARCH

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Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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7620 NW LOOP 41	0
SAN ANTONIO, TX	782270000
SSM HEALTH SAIN	
UNIVERSITY HOSP	

3635 VISTA AVENUE ST LOUIS, MO 631100000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 43-6003128 10.000 SPONSORSHIP ST CHARLES CITY SCHOOL DISTRICT 400 NORTH 6TH STREET

RESEARCH

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Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

400 NORTH 6TH STREET ST CHARLES, MO 63301 ST JOSEPHS HOSPITAL AND MEDICAL CENTER

350 WEST THOMAS RD PHOENIX, AZ 850134409

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) ST LOUIS AMERICAN 43-1686282 501C3 10,000 SPONSORSHIP

FOUNDATION 4144 LINDELL BOULEVARD ST LOUIS, MO 63108							
ST LOUIS BLACK REPERTORY	43-1220180	501C3	35,000	45,090	FMV	SPACE RENTAL	SPONSOR

ST LOUIS, MO 63108

ORSHIP COMPANY 4709 DFI MAR

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) ST LOUIS CENTER FOR 43-1491605 501C3 11.250 SPONSORSHIP INTERNATIONAL RELA 121 SOUTH MERAMEC

SPONSORSHIP

11.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

ST LOUIS, MO 63105 ST LOUIS CHILDRENS

HOSPITAL FOUNDATION P O BOX 955423 ST LOUIS, MO 63195

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other) ST LOUIS COLLEGE OF 43-0652675 501C3 64.730 RESEARCH

SPONSORSHIP

111.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

PHARMACY
4588 PARKVIEW PLACE
ST LOUIS, MO 63110
ST LOUIS COMMUNITY

FOUNDATION INC 2 OAK KNOLL PARK SAINT LOUIS, MO 63105

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 43-6003242 GOVERNMENT 6.158 RESEARCH ST LOUIS COUNTY 6121 N HANLEY BERKELEY, MO 631342003

ST LOUIS FIRE DEPARTMENT 20-0512259 501C3 10.000 SPONSORSHIP FOUNDATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

4625 LINDELL BLVD SUITE 210 ST LOUIS, MO 63108

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) ST LOUIS INTEGRATED 20-3288245 501C3 64,152 RESEARCH HEALTH NETWORK

1520 MARKET STREET SUITE 4034 ST LOUIS, MO 63103					
ST LOUIS OVARIAN CANCER AWARENESS	05-0523962	501C3	15,000		SPONSO

SAINT LOUIS, MO 63131

SORSHIP 12015 MANCHESTER RD STE 130

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) ST LOUIS REGIONAL HEALTH 43-1883638 501C3 5.000 SPONSORSHIP

FOUNDATION

5050 OAKLAND AVENUE ST LOUIS, MO 63110

ST LOUIS, MO 63104 ST LOUIS SCIENCE CENTER	43-1496632	501C3	8.600		RESEARCH
COMMISSION 1113 MISSISSIPPI AVE STE 113					

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 43-1027364 32.745 SPONSORSHIP ST LOUIS ZOOLOGICAL PARK ONE GOVERNMENT DRIVE ST LOUIS, MO 63110

ST LUKES HOSPITAL OF 44-0545297 501C3 112.131 RESEARCH KANSAS CITY INC 4401 WORNALL ROAD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

KANSAS CITY, MO 641113220

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government 81-3035828 7.500 laward

STARRY NIGHT CAFE LLC 1621 DOLMAN ST ST LOUIS, MO 63104

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ANCHORAGE, AK 99503

STATE OF ALASKA 92-6001185 GOVERNMENT 29,959 IRESEARCH 3601C STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 75-1835298 501C3 25.000 SPONSORSHIP SUSAN G KOMEN BREAST CANCER FOUNDATION 5005 LB1 FREEWAY STE 250

DALLAS.TX 75244 SWIM ACROSS AMERICA INC 22-3248256 501C3 25.000 SPONSORSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

11600 N COMMUNITY HOUSE RD STF 100

CHARLOTTE, NC 28277

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 61-1716231 501C3 10.000 SPONSORSHIP TED CONFLUENCE 6614 CLAYTON ROAD SUITE

321 ST LOUIS, MO 63117 TEMPLE UNIVERSITY 23-1365971 501C3 160.381

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3340 N BROAD STREET
PHILADELPHIA, PA 191405140

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) 74-1974733 STATE OF TX 155.617 RESEARCH TEXAS A&M UNIVERSITY SYSTEM 1470 WILLIAM D FITCH PKWY COLLEGE STATION, TX 778434645 48,258 TEXAS A&M UNIVERSITY 74-6000531 IRESEARCH SYSTEM HEALTH SCI

3150 TAMU

778433150

COLLEGE STATION, TX

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) TRUMAN MEDICAL CENTER 44-0661019 E0103 16 9/1 I DECEMBOL

CHESTNUT HILL, MA 024673800

2301 HOLMES STREET KANSAS CITY, MO 641082640	44-0001018	50103	40,041		RESEARCH
TRUSTEES OF BOSTON UNIVERSITY 140 COMMONWEALTH SPON PRGM	04-2103547	501C3	1,117,118		RESEARCH

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 02-0222111 501C3 65.835 RESEARCH TRUSTEES OF DARTMOUTH COLLEGE RESEARCH

## 6132 MCNUTT ROOM 102C HANOVER, NH 037553541 TRUSTEES OF PURDUE 35-6002041 501C3 494.416

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

UNIVERSITY 24025 NETWORK PLACE

CHICAGO, IL 606731240

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) TRUSTEES OF TUFTS COLLEGE 04-2103634 501C3 144,470 RESEARCH TRIC AIZA

TOWER

PHILADELPHIA, PA 19103

169 HOLLAND STREET SOMERVILLE, MA 02144					
TRUSTEES UNIVERSITY OF PENNSYLVANIA 1500 MARKET ST 8TH FL W	23-1352685	501C3	471,749		RESEARCH

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 72-0423889 501C3 71.333 RESEARCH TULANE UNIVERSITY 1440 CANAL STREET SL18 NEW ORLEANS, LA 701122699

NEW ORLEANS, LA 701122699

UNITED WAY OF GREATER ST 43-0714167 501C3 43,967

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

910 NORTH 11TH STREET ST LOUIS, MO 63101

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 61-6033693 501C3 7.867 RESEARCH UNIV OF KENTUCKY RESEARCH FOUNDATION 500 S LIMESTONE LEXINGTON, KY 405260001 SPONSORSHIP

UNIVERSITY CITY SCHOOL 43-6003857 501C3 10.000 DISTRICT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

8136 GROBY ROAD UNIVERSITY CITY, MO 63130

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government RESEARCH

IRESEARCH

21.041

UNIVERSITY OF ALABAMA	63-6005396	501C3	118,29
BIRMINGHAM			
1919 7TH AVENUE SOUTH			
BIRMINGHAM, AL 352940007			

74-2652689

UNIVERSITY OF ARIZONA

1303 EAST UNIVERSITY BOX 5 TUCSON, AZ 857190521

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

STATE OF AZ

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) UNIVERSITY OF ARKANSAS 71-6046242 STATE OF ARI 144.640 IRESEARCH

300

DAVIS, CA 95618

FOR MED SCIENCE 4301 WEST MARKHAM LITTLE ROCK, AR 722057199					
UNIVERSITY OF CALIFORNIA DAVIS 1850 RESEARCH PARK DR STE	65-4684995	501C3	425,836		RESEARCH

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) UNIVERSITY OF CALIFORNIA 95-6006143 501C3 2 259 054 RESEARCH

1330

SAN FRANCISCO, CA 94143

LOS ANGELES PO BOX 951735 23-126 CHS LOS ANGELES, CA 900951735	33 3333113	30103	2,233,031		TO LANCETT
UNIVERSITY OF CALIFORNIA SAN FRANCISCO MT ZION CANCER CENTER BOX	94-6036493	501C3	544,930		RESEARCH

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government ARCH

UNIVERSITY OF CHICAGO 105 WEST ADAMS ST CHICAGO, IL 60603	36-2177139	501C3	65,841		RESEARCH
UNIVERSITY OF CINCINNATI	31-6000989	501C3	14,696		RESEARCH

PO BOX 670553

CINCINNATI, OH 452210222

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 84-6000555 501C3 506.014 RESEARCH UNIVERSITY OF COLORADO 347 UCB 52-1725543 434.913 RESEARCH

BOULDER, CO 80309 UNIVERSITY OF CONNECTICUT HEALTH 263 FARMINGTON AVE MC5335

FARMINGTON, CT 060305335

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 51-6000297 501C3 243.504 RESEARCH

IRESEARCH

UNIVERSITY OF DELAWARE 210 HULLIHEN HALL NEWARK, DE 19716

16.290

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

UNIVERSITY OF DENVER

2601 F COLORADO AVE DENVER, CO 802080001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 59-6002052 STATE OF FL 247.896 RESEARCH

UNIVERSITY OF FLORIDA PO BOX 115500 GAINESVILLE, FL 326115500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

HONOLULU, HI 968222234

UNIVERSITY OF HAWAII 99-6000354 GOVERNMENT 15.840 IRESEARCH 2440 CAMPUS ROAD BOX 368

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government UNIVERSITY OF ILLINOIS 37-6000511 501C3 913.927 RESEARCH 506 S WRIGHT STREET URBANA.IL 61801

IRESEARCH

512.343

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

STATE OF IA

UNIVERSITY OF IOWA

501 NEWTON RD 333MRC IOWA CITY, IA 52242

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) UNIVERSITY OF KANSAS 48-0680117 501C3 9.440 RESEARCH CENTER FOR RESEAR 2385 IRVING HILL ROAD LAWRENCE, KS 660457568

2385 IRVING HILL ROAD

LAWRENCE, KS 660457568

UNIVERSITY OF KENTUCKY
1401 UNIVERSITY DR UNIV
KENTCKY

1401 UNIVERSITY DR UNIV

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

LEXINGTON, KY 405460236

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) UNIVERSITY OF MARYLAND 52-1125663 501C3 347,224 RESEARCH DALTIMODE

620 W LEXINGTON ST 4TH FL BALTIMORE, MD 212011508

620 W LEXINGTON STREET 4TH FL BALTIMORE, MD 21201					
UNIVERSITY OF MARYLAND BALTIMORE	52-6002036	501C3	120,071		RESEARCH

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 04-3167352 501C1 661.063 RESEARCH UNIVERSITY OF MASSACHUSETTS 154 HICKS WAY

RESEARCH

351.079

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

AMHERST, MA 01003

UNIVERSITY OF MIAMI
4600 RICKENBACKER
CAUSEWAY

MIAMI, FL 33149

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) UNIVERSITY OF NEBRASKA 47-4049123 STATE OF NE 38.226 IRESEARCH

871310001

985818 NEBRASKA MEDICAL CTR OMAHA, NE 681985818					
UNIVERSITY OF NEW MEXICO 1 UNIVERSITY OF NEW MEXICO ALBUQUERQUE, NM	85-6000642	501C3	20,427		RESEARCH

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government FC COO1303 E0460 C43 444

IRESEARCH

CAROLINA  100 E FRANKLIN STE 200  CHAPEL HILL, NC 275998115	26-6001393	501C3	612,411		RESEARCE
CHAPEL HILL, NC 2/3998113					
UNIVERSITY OF NOTRE DAME	35-0868188	501C3	30.578		RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

NOTRE DAME, IN 465565708

940 GRACE HALL

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 93-6001786 STATE OF OR 5.013 RESEARCH UNIVERSITY OF OREGON 3181 SW SAM JACKSON PARK ROAD

RESEARCH

2.590.753

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

ROAD
PORTLAND, OR 972393098

UNIVERSITY OF PITTSBURGH 25-0965591
3100 CATHEDRAL OF

LEARNING

PITTSBURGH, PA 15260

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 16-0743209 501C3 751.700 RESEARCH UNIVERSITY OF ROCHESTER 252 ELMWOOD AVENUE ROCHESTER, NY 14642 UNIVERSITY OF SOUTH 59-3102112 STATE OF FL 272.873 IRESEARCH

FLORTDA 4202 E FOWLER AVE

TAMPA, FL 336205800

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 95-1642394 501C3 630.329 RESEARCH UNIVERSITY OF SOUTHERN CALIFORNIA

837 DOWNEY WAY ROOM 330 LOS ANGELES. CA 900891147 UNIVERSITY OF TENNESSEE 62-6001636 501C3 129.814 1618 W CUMBERLAND 201

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

KNOXVILLE, TN 379963332

RESEARCH HENSON

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) UNIVERSITY OF TEXAS AT 75-6000121 501C3 8.774 RESEARCH ARLINGTON

BOX 19145 ARLINGTON, TX 761090145 UNIVERSITY OF TEXAS AT 31-1657375 501C3 32.824 AUSTIN

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

AUSTIN, TX 787121192

RESEARCH 2515 SPEEDWAY C1600

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) UNIVERSITY OF TEXAS AT SAN 74-1717115 501C3 118.869 RESEARCH ANTONIO ONE UTSA CIRCLE SAN ANTONIO, TX 782491644 UNIVERSITY OF TEXAS 05-0559514 501C3 24.515 RESEARCH

DALLAS PO 830688

RICHARDSON, TX 750830688

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) UNIVERSITY OF TEXAS EL 74-6000813 501C3 32.006l RESEARCH PASO 500 W UNIVERSITY AVENUE EL PASO. TX 799680587

RESEARCH

6.568

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

UNIVERSITY OF TEXAS

HEALTH SCIENCE CEN 1200 HERMAN PRESSLER DR HOUSTON, TX 770303900 74-1761309

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) UNIVERSITY OF TEXAS MD 74-6001118 501C3 33.659 RESEARCH ANDERSON CANCER

PO BOX 4390 HOUSTON, TX 772104390 UNIVERSITY OF TEXAS 74-6000949 STATE OF TX 181.096

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

GALVESTON, TX 77555

RESEARCH MEDICAL BRANCH 301 UNIVERSITY BLVD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) UNIVERSITY OF TEXAS PRESS 74-6000203 501C3 71.356 RESEARCH 300 W 21ST STREET 75-6002868 STATE OF TX 711.474 RESEARCH

AUSTIN, TX 78712 UNIVERSITY OF TEXAS SOUTHWESTERN 5323 HARRY HINES BLVD NB8206

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

DALLAS, TX 753907208

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government LINITY/EDCITY OF TEVAC 75-6042147 E0103 12 0001 IRESEARCH

IRESEARCH

UNIVERSITY OF TEXAS	/3-004214/	30103	15,000		KESEAKC
SOUTHWESTERN					
5323 HARRY HINES BLVD					
DALLAS,TX 753909141					

5.259

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

UNIVERSITY OF TOLEDO 3000 ARLINGTON AVE

TOLEDO, OH 436142595

34-6401483

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 87-6000525 501C3 568.959 RESEARCH UNIVERSITY OF UTAH 257 SOUTH 1400 EAST SALT LAKE CITY, UT 84112

UNIVERSITY OF VIRGINIA 54-6001796 501C3 848.979 21 HOSPITAL DR OMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

RESEARCH SUHLING CHARLOTTESVILLE, VA 22908

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government EARCH

LINE (EDCIT) OF MICCONCIN	22 422442		001 E41		
UNIVERSITY OF WASHINGTON PO BOX 94224 SEATTLE, WA 98124	91-6001537	501C3	1,770,982		RESEA

MADISON, WI 537151218

UNIVERSITY OF WISCONSIN 39-6006492 STATE OF WIL 281.561 IRESEARCH 21 N PARK ST

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government LINIVERSITY OF WISCONSIN 39-1805963 501C3 318 017 RESEARCH

MADISON 1111 HIGHLAND AVE MADISON, WI 53705	39-1003303	30103	310,017		RESEARCH
UNLEASHING POTANTIAL	43-0654857	501C3	10.000		SPONSORSHIP

43-0654857 501C3 UNI FASHING POTANTIAL 1000 N VANDEVENTER AVE

ST LOUIS, MO 63113

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 72-0564834 GOVERNMENT 35.796 RESEARCH US DEPARTMENT OF AGRICULTURE

RESEARCH

150,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

1815 NORTH UNIVERSITY	
STREET	
PEORIA, IL 616043999	

62-1788235

UT-BATTELLE LLC

1 BETHEL VALLEY ROAD OAK RIDGE, TN 378316196

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 62-0476822 501C3 35.279 RESEARCH VANDERBILT UNIVERSITY 702 LIGHT HALL 0615 NASHVILLE, TN 372320615 VANDERBILT UNIVERSITY 35-2528741 501C3 616.192 RESEARCH

MEDICAL CENTER
PO BOX 121236
DALLAS, TX 753121236

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) VENTURE CAFE ST LOUIS 81-0818111 501C3 37.500 SPONSORSHIP 4240 DUNCAN AVE STE 200 SAINT LOUIS, MO 63110 VETERANS RESEARCH AND 43-1624664 501C3 57.498 RESEARCH

EDUCATION FOU 501 NORTH GRAND BLVD

ST LOUIS, MO 631031006

SUITE 300

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) WABBANI LLC 82-4582054 10.000 laward 3565 SHIRE LANE

ST CHARLES, MO 63301

WAKE FOREST UNIVERSITY
HEALTH SCIENCES
HT RESEARCH CTR MEDICAL
CTR BI V

RESEARCH

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

WINSTON SALEM, NC 27157

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) 91-6001108 STATE OF WA 147.874 RESEARCH WASHINGTON STATE UNIVERSITY

1715 NE SOUTH FAIRWAY RD PULLMAN, WA 991647520					
WASHINGTON UNIVERSITY STUDENT MEDIA IN ONE BROOKINGS DRIVE WASHINGTON UNIV, MO	43-1869208	501C3	98,328		SPONSORSHIP

63130

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 43-0679176 501C3 143.835 SPONSORSHIP WASHINTON UNIVERSITY NEWMAN CENTER 6352 FORYSTH ST LOUIS, MO 63105

RESEARCH

406.820

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

WEILL CORNELL MEDICAL

COLLEGE 1300 YORK AVE NEW YORK, NY 10065 13-1623978

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government WESLEYAN UNIVERSITY 06-0646959 501C3 16.726 IRESEARCH

237 HIGH STREET MIDDLETOWN, CT 064590000					
WOMEN OF ACHIEVEMENT 1001 HIGHLAND PLAZA DRIVE	43-1687327	501C3	5,000		SPONSORSHIP

ST LOUIS, MO 63110

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 92-0182878 501C3 5.000 SPONSORSHIP WOMENS FOUNDATION OF GREATER ST LOUIS

IRESEARCH

8816 MANCHESTER ROAD STE 286 BRENTWOOD, MO 63144

144.964

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

YALE UNIVERSITY 06-0646973

150 MUNSON STREET NEW HAVEN, CT 065208063

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 501C3 35.265 RESEARCH YESHIVA UNIVERSITY 13-1624225 1300 MORRIS PARK AVE VE 6B27

BRONX, NY 10461

efil	le GRAPHIC pr	int - DO NOT PROCESS	As Filed Data	a -	DLN: 934	9313	7030	751	
Sch	nedule J	Cor	npensati	ion Information	MO	IB No.	1545-0	0047	
(For	m 990)	For certain Officers	t 📙						
		► Complete if the organ		ited Employees ered "Yes" on Form 990, Part IV, lin	e 23.	2019			
D			▶ Attach	to Form 990. instructions and the latest informati			o Pul		
•	tment of the Treasury al Revenue Service	P do to <u>www.ms.gov</u> /	101111990			Insp	ectio	n	
	me of the organiza SHINGTON UNIVERS			Em	ployer identificat	ion nu	ımber		
				43-	0653611				
Pa	rt I Questi	ons Regarding Compensation	on						
<b>1</b> a	Check the appro	oniate hov(es) if the organization r	provided any of	the following to or for a person listed on	Form		Yes	No	
La				y relevant information regarding these it					
	✓ First-class	or charter travel	$\checkmark$	Housing allowance or residence for pers	onal use				
	☑ Travel for	companions		Payments for business use of personal r	esidence				
		nification and gross-up payments	<b>✓</b>	Health or social club dues or initiation fe					
	☐ Discretion	ary spending account	$\checkmark$	Personal services (e.g., maid, chauffeur	r, chef)				
b	If any of the box	xes on Line 1a are checked, did th	e organization	follow a written policy regarding paymen	t or				
		•		ve? If "No," complete Part III to explain		<b>1</b> b		No	
2				or allowing expenses incurred by all r, regarding the items checked on Line 1;	a?	2		No	
_	To although a collection	Service of the College of the Cities of		The control Colombia and the control of the control					
3		if any, of the following the filing of EO/Executive Director. Check all t		d to establish the compensation of the not check any boxes for methods					
	used by a relate	d organization to establish compe	nsation of the	CEO/Executive Director, but explain in Pa	art III.				
	<b>✓</b> Compensa	ation committee	<b>✓</b>	Written employment contract					
		ent compensation consultant	<b>✓</b>	Compensation survey or study					
	<b>✓</b> Form 990	of other organizations	$\checkmark$	Approval by the board or compensation	committee				
4	During the year, related organiza		0, Part VII, Se	ction A, line 1a, with respect to the filing	organization or a				
а	Receive a sever	ance payment or change-of-contro	ol payment? .			4a		No	
b	Participate in, o	r receive payment from, a supplen	nental nonqual	ified retirement plan?		4b	Yes		
c				nsation arrangement?		4c		No	
	If "Yes" to any o	of lines 4a-c, list the persons and p	provide the app	licable amounts for each item in Part III.					
	Only 501(c)(3	), 501(c)(4), and 501(c)(29) o	rganizations	must complete lines 5-9.					
5				the organization pay or accrue any					
	•	ontingent on the revenues of:							
a		1?				5a		No	
b		anization?				5b		No	
6	For persons liste	·	A, line 1a, did	the organization pay or accrue any					
а	The organization	1?				6a	Yes		
b	=					6b		No	
	If "Yes," on line	6a or 6b, describe in Part III.							
7				the organization provide any nonfixed rt III		7	Yes		
8	subject to the in	nitial contract exception described	in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," descri 		8	Vos		
9	If "Yes" on line 8	8, did the organization also follow	the rebuttable	presumption procedure described in Reg	ulations section	9	Yes	 No	
For F	Paperwork Redu	ction Act Notice, see the Instr	uctions for Fo	orm <b>990.</b> Cat. No. 5005	3T Schedule J	(Form	9901	2019	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, reporting instructions, on row (ii). Do not list any individuals that are not listed on Form State. The sum of columns (B)(i)-(iii) for each listed individual must equal the t	990	, Part VII.						vidual
(A) Name and Title	Jua		kdown of W-2 and/o compensation		(C) Retirement and other	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in
	,	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990
See Additional Data Table				I	•			

Page 3

Return Reference	Explanation
	- A Airfare upgrades or charter travel For all employees, the universitys travel policy provides reimbursement of standard commercial coach or equivalent airfare but does allow upgrade on flights in excess of five hours or for medical reasons. One officer and one of the five highest compensated employees were provided with airfare upgrades to first class in accordance with the universitys travel policy. This benefit was not treated as taxable income. B Travel for companions For all employees, the universitys travel policy provides reimbursement for incremental travel expenses of a spouse or other companion when there is a legitimate business purpose for their attendance and written authorization is obtained. Three officers, one former officer, and one of the five highest compensated employees were provided with travel for companions in accordance with the universitys travel policy. This benefit was not treated as taxable income. C Housing allowance or residence for personal use is subject to review and approval of the Board of Trustees or applicable committee thereof. As a condition of his employment and as necessary for performance of his duties and the convenience of the university as his employer, the Chancellor is required to reside on campus in a university-owned

residence. This benefit is not treated as taxable income. Two officers, one former officer, and one of the 5 highest compensated employees were provided housing allowances which were treated as taxable income. D Health or Social club dues or initiation fees Four officers, two former officers and one of the five highest compensated employees are reimbursed for the dues of a single social club. Social club dues are paid for a limited number of members of executive management for the purpose of providing a venue conducive to the success of alumni and university business-related activities. The decision to make these payments was approved by the Chancellor for senior executives and by the Chairman of the Board of Trustees for the Chancellor. This benefit was not treated as taxable income. E Personal services were made available in the form of housekeeping for the Chancellors residence, a university owned property, concurrent with employment. As a condition of his employment and as necessary for performance of his duties and the convenience of the university as his employer, the Chancellor is required to

· A David T. Blasingame - university contribution to 457f plan of 50,000, B Michael R. Cannon - university contribution to 457f plan of 100,000, C H. Holden Thorp -

Part I Line 6 7 - The universitys School of Medicine is organized into major Departments. Each department has a faculty compensation plan that provides quidelines to the Chair of the Department for setting annual compensation of the individual faculty members. Two of the five highest compensated employees listed in Part VII, Section A of the Form 990 are faculty in a department that had salaries determined under departmental quidelines that provide for base salaries that are fixed payments. In this department, however, there are elements of compensation under the quidelines that are not fixed payments or determined by fixed formula. The Chair of the Department determines, in full or in part, the amount of this element based on the employees performance. Further, there is an element expressed as a percent of net surplus generated by the efforts of the employee. The universitys Chief Investment Officer also receives a payment based on the net earnings of an activity of the university using a fixed formula. See discussion of Part I, line 7 below for further information.

university contribution to 457f plan of 150,000. D Henry S. Webber - university contribution to 457f plan of 150,000.

Part I Line 7 - The Chief Investment Officers compensation arrangement provides for both fixed base compensation and incentive compensation based on the performance of the

universitys investment portfolio relative to pre-established peer and market benchmarks. An annual incentive is comprised of three components two of which are based upon a fixed formula and one which is based on qualitative factors. The latter is determined at the discretion of a governing board under authority assigned

reside on campus and housekeeping was included as part of the agreement.

by the university Board of Trustees to oversee management of the universitys endowment. Additionally, a long term incentive based on fixed formula for performance includes a five year vesting schedule for the payout of earned incentive.

Part I Line 8

Part I Line 4b

Schedule J (Form 990) 2019

- The University applies the initial contract exception to officers whose employment with the University began during the fiscal year. During fiscal year 2020, this

Software ID: 19009610
Software Version: 19.2.1.0

**EIN:** 43-0653611

Name: WASHINGTON UNIVERSITY

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees										
(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in		
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	column (B) reported as deferred on prior Form 990		
1MARK S WRIGHTON TRUSTEE, FORMER CHANCELLOR	(i) (ii)	2,788,318		42,321	32,200	32,099	2,894,938	1,617,330		
1SCOTT L WILSON CHIEF INVESTMENT OFFICER	(i) (ii)	818,494	1,665,412	20,066	65,260	33,583	2,602,815			
2TIMOTHY J EBERLEIN CHAIR OF SURGERY/DIR SITEMAN CANCER CTR	(i) (ii)	1,621,355		36,275	32,200	31,956	1,721,786	187,013		
3DAVID H PERLMUTTER EXEC VC FOR MEDICAL AFFAIRS	(i)	1,540,838		41,098	19,600	10,314	1,611,850			
4MATTHEW B DOBBS DR ASA C MRS DOROTHY W JONES PROF ORTHO	(ii) (i)	610,737	868,792	20,569	23,800	19,379	1,543,277			
SURGERY  5JOHN C CLOHISY DB VIEHMANN DIST PROF OF ORTHO SURGERY	(ii) (i)	718,039	690,578	22,354	32,200	19,625	1,482,796			
6RALPH G DACEY JR DEPT HEAD NEUROSURGERY	(ii) (i)	1,219,934		17,786	32,200	31,956	1,301,876			
7MAHENDRA R GUPTA GERALDINE J. ROBERT L. VIRGIL PROFESSOR	(ii) (i)	514,108		719,552	32,200	14,919	1,280,779			
8 HERBERT HOLDEN THORP JR - until 715 PROVOST EXEC VC FOR	(ii) (ii)	637,545		380,773	169,600	28,786	1,216,704	250,000		
ACADEMIC AFFAIRS  9HENRY STEVEN WEBBER EXEC VC FOR ADMINISTRATION	(i) (ii)	521,337	79,050	351,513	178,000	14,919	1,144,819	250,000		
10ANDREW D MARTIN CHANCELLOR	(i) (ii)	870,473		22,826	19,600	84,861	997,760			
11 DAVID THOMAS BLASINGAME FORMER EXEC VC FOR ALUMNI AND DEV	(i) (ii)	588,994	50,000	102,898	32,200	12,531	786,623			
MARION CRAIN - effective 71619 INTERIM PROVOST EXEC VC	(i) (ii)	491,725		22,520	28,000	10,314	552,559			
FOR ACADEMIC AFFAIRS  13MICHAEL R CANNON FORMER EXEC VC GENERAL COUNSEL	(i) (ii)	365,876		124,014	32,200	16,481	538,571			
14PAMELLA A HENSON EXEC VC FOR AD PROGRAMS	(i) (ii)	419,296		20,159	57,200	19,496	516,151			
15 LORI S WHITE - until 5312020 VC FOR STUDENT AFFAIRS	(i) (ii)	402,154		53,596	19,600	10,386	485,736			
16WILLIAM S STOLL VC FOR UNIVERSITY ADVANCEMENT	(i) (ii)	408,941		21,585	32,200	19,625	482,351			
17KURT T DIRKS VC FOR INTERNATIONAL AFFAIRS	(i) (ii)	439,685		-20,144	32,200	19,379	471,120			
<b>18</b> CHRIS KIELT VC CHIEF INFORMATION OFFICER	(i) (ii)	364,588	75,000	3,481		16,402	459,471			
19JENNIFER K LODGE VC FOR RESEARCH	(i) (ii)	385,349		20,847	28,000	8,053	442,249			

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (E) Total of columns (A) Name and Title (C) Retirement and (D) Nontaxable (F) Compensation in (B) Breakdown of W-2 and/or 1099-MISC compensation (B)(i)-(D)column (B) other deferred benefits (i) Base Compensation (iii) (ii) reported as deferred on compensation Other reportable Bonus & incentive prior Form 990 compensation compensation 21MONICA J ALLEN (i) 366,306 21,705 32,200 8,437 428,648 VC GENERAL COUNSEL (ii) 1AMY B KWESKIN (i) 345,810 20,672 32,200 26,653 425,335 VC FOR FINANCE CFO (ii) 2JAMES WERTSCH (i) 315,189 23,388 32,200 24,509 395,286 FORMER VC FOR INTL AFFAIRS 307,742 3LEGAIL POOLE CHANDLER (i) 21,226 32,200 10,386 371,554 VC FOR HUMAN RESOURCES (ii) 4DEDRIC A CARTER (i) 331,944 293 19,600 17,485 369,322 VC FOR OPERATIONS TECH TRANSFER (ii) **5**ERIC B UPIN (i) 360,000 360,000 TRUSTEE (ii) **6**PAMELA SUE LOKKEN (i) 293,556 21,099 32,200 8,125 354,980 VC - GOVERNMENT COMMUNITY RELATIONS (ii) 315,346 (i) 7,458 19,600 8,125 350,529 JILL DIANE FRIEDMAN until 1120 VC FOR PUBLIC AFFAIRS 8MARK AMIRI 267,836 1,804 18,970 16,481 305,091 ASSOC VC FOR FINANCE TREASURER (ii) 215,683 6,851 341 19,091 26,653 268,619 ROBERT WILD - effective 612020 INTERIM VC FOR STUDENT **AFFAIRS** 10 183,424 (i) 559 13,215 19,379 216,577 JULIE A FLORY - effective 112020 (ii) INTERIM VC FOR PUBLIC AFFAIRS 11IDA H EARLY (i) 165,894 4,471 19,493 10,386 200,244 SECRETARY BD OF TRUSTEES

845

16,174

21,239

194,679

12EDWARD D WELKER

INFORMATION OFFICER

FORMER VC CHIEF

(i)

(ii)

156,421

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule K **Supplemental Information on Tax-Exempt Bonds** (Form 990) ▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

▶ Attach to Form 990.

OMB No. 1545-0047

DLN: 93493137030751

Open to Public

Inspection

▶Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization **Employer identification number** WASHINGTON UNIVERSITY 43-0653611 Part I **Bond Issues** (b) Issuer EIN (c) CUSIP # (d) Date issued (f) Description of purpose (g) Defeased (i) Pool (a) Issuer name (e) Issue price (h) On behalf of financing issuer Yes No Yes No Yes No Х Health & Educational Facilities 43-1178966 606901N93 02-05-2003 25.135.000 | See Part VI - Bond A Χ Authority Health & Educational Facilities 43-1178966 60636AAS2 06-29-2011 127,122,717 | See Part VI - Bond B Χ Χ Χ Authority Part  ${f I}$ **Proceeds** Α В C D 2 119,335,000 3 25,142,853 127,123,185 5 726,998 402,784 6 102,941,118 7 108,340 177,442 8 23,500 9 10 24,281,880 23,601,836 11 2,135 12 13 2003 2012 Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue of tax-exempt 14 Χ Χ 

Part III Was the organization a partner in a par financed by tax-exempt bonds? . . .

**Private Business Use** 

Were the bonds issued as part of an advance refunding issue of taxable

Does the organization maintain adequate books and records to support the final allocation of

Department of the Treasury

15

16

	Α		ı		
	Yes	No	Yes	No	Yes
Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		Х		Х	
Are there any lease arrangements that may result in private business use of bond-financed property?	X		X		
Paperwork Peduction Act Notice see the Instructions for Form 990	Cat	- No 50193E			

Χ

Χ

Χ

Χ

Χ

Χ

Yes

No

D

No

Penalty in Lieu of Arbitrage Rebate? . . . If "No" to line 1, did the following apply?...

Exception to rebate? . . . . . . . . . . . .

If "Yes" to line 2c, provide in Part VI the date the rebate Is the bond issue a variable rate issue? . . . . .

Was the hedge superintegrated? . . . . . . Was the hedge terminated?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

counsel to review any research agreements relating to the financed property?

a section 501(c)(3) organization or a state or local government . . . . . Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3)

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

Has the organization established written procedures to ensure that all nongualified bonds of

Enter the percentage of financed property used in a private business use by entities other than

Schedule K (Form 990) 2019

C

d

6

8a

Part IV

b

C

Arbitrage

Page **2** 

D

Schedule K (Form 990) 2019

No

Yes

В C D Α Yes Nο Yes No Yes No Yes No Are there any management or service contracts that may result in private business use of Х Х If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside b

Χ

Χ

Χ

1.830 %

1.830 %

Χ

Χ

В

Yes

Χ

Not Applicable

Χ

No

Χ

Χ

Χ

Χ

Χ

Χ

Νo

Χ

Χ

Χ

Χ

Α

Yes

Χ

Χ

Not Applicable

Χ

Χ

Χ

0.730 %

0.730 %

Χ

Х

Yes

C

No

counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bond-financed If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

Schedule K (Form 990) 2019

(GIC)?

period?

Part VI

Part I

Arbitrage (Continued)

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

**Procedures To Undertake Corrective Action** 

if self-remediation is not available under applicable regulations?

requirements of section 148? . . .

Return Reference

			4
		Yes	No
)	Were gross proceeds invested in a guaranteed investment contract		Х

Not Applicable

Supplemental Information. Provide additional information for responses to questions on Schedule K. (See instructions).

В

No

Explanation

No

Χ

Yes

Χ

R

No

Yes

No

C

Nο

Yes

Yes

Not Applicable

Yes

Χ

Bond A - Provide funds for new construction, expansion and renovation of garages and buildings including fixed equipment.

Page 3

No

D

D

No

Yes

Yes

Return Reference	Explanation
Part I	Bond B - Series 2011A - Provide funds for the new construction of buildings including fixed equipment. Series 2011B - provide funds to defease a portion of Series 1998A issued February 15, 1998, and a portion of Series 2001B issued August 15, 2001.

Return Reference	Explanation
art II Line 3	- Total proceeds of issue includes investment earnings - Bond A - 7,853, Bond B - 468.

Part II Li

Return Reference	Explanation
Part IV Line 2c	- Date rebate calculation was performed - Bond B - 11/15/2012.

Return Reference	Explanation
Part IV Line 2c	- Date rebate calculation was performed - Bond B - 11/15/2012.

Schedule L (Form 990 or 990-EZ	,	Trans	action	s with Ir	atorosto	d Doroon				0	MB No.	15/15		
	n	110110			11616516	u Person				_		1343	-0047	
	Form 990 or 990-EZ) Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26,						_	25a, 2	25b, 20	6,	2019			
		27, 28a, 2				, line 38a or 4	0b.				ZU		9	
Department of the Treasury	,   <b>⊳</b> Gc	to www.irs		າ to Form 990 ກ990 for inst		the latest inf	orma	tion.			Open	to Pi	ublic	
Internal Revenue Service	'		,								Insp			
Name of the organiz							Er	mplo	yer ide	entifica	ation n	umb	er	
WASHINGTON UNIVERS	SITY						43	3-065	3611					
Part I Excess	Benefit Trans	sactions (se	ction 501(c	n(3) section !	501(c)(4) and	section 501(c				ns only	١			
	if the organizati													
	ame of disqualifi			Relationship be	etween disqua	lified person an		(c) [	escrip	tion of		<b>)</b> Cor	rected?	
					organization			tr	ansacti	ion	Y	Yes No		
							_							
							-							
							+							
							+							
							+							
2 Enter the amou	int of tax incurre	ed by the orga	nization ma	anagers or dis	gualified perso	ons during the	vear i	ınder	section					
4958									_	· \$ ——				
3 Enter the amou	int of tax, if any	, on line 2, ab	ove, reimb	ursed by the o	rganization .		•	•		\$				
Part II Loans	to and/or F	rom Intere	sted Pers	sons.										
Comple	ete if the organiz	ation answere	d "Yes" on	Form 990-EZ,	, Part V, line 3	8a, or Form 99	0, Pa	rt IV,	line 26	; or if	the org	aniza	tion	
	d an amount on		•		1									
(a) Name of (interested person w	(b) Relationship			) Loan to or from the organization? (e) Original (f) Balance principal due amount			(g) In (h) default? Approved			(i) Written by agreement?				
merested person w	intil organization	loan	organ			duc	que querau	idic.	board or		ug	agreement.		
					_		committ							
(4)			То	From		200 000	Yes	No	Yes	No	Yes		No	
(1) NONE TO				X		388,889								
INTERESTED														
PERSONS														
											-+			
											-			
Total		l l			<u> </u>	388,889				l .				
	or Assistanc					300,003								
	ete if the organ					line 27.								
(a) Name of interest							f assi	stand	e	<b>(e)</b> Pu	rpose o	f ass	istance	
	inte	rested person	and the											
		organizatio	n											
									_					
	1		<b>I</b>			I								

Name of interested person	between interested person and the organization	transaction	(d) Description of transaction	organiz reven	f ation's
See Additional Data Table					

Return Reference

Part V

Part II Line 1

Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

Schedule L (Form 990 or 990-EZ) 2019

## - No loans were made to persons who meet the definition of interested persons for purposes of Schedule L. Part II. The loans reported on Form 990, Part X, Line 6, column A were made to other disqualified persons not subject to reporting on Schedule L, Part II.

Explanation

## **Additional Data**

(1) Elizabeth Abente

(1) Alexandra Carr

**Software ID:** 19009610 **Software Version:** 19.2.1.0

**EIN:** 43-0653611

Name: WASHINGTON UNIVERSITY

86,802 Employment

142,742 Employment

Form 990, Schedule L	Part IV - Busine	ss Transactions Inv	olving Interested F	ersons?

(a) Name of interested person	(b) Relationship	(c) Amount of	(d) Descrip
	between interested	transaction	
	person and the		

organization

Sister of officer Rob

Sister of officer Monica

ription of transaction

(e) Sharing organization's

revenues?

No

No

No

Yes

rm 990, Schedule L, Part IV - Busine	ess Transactions Inv	olving Interested Persons

rm 990,	Schedule L,	Part IV -	Busines	s Transaction	ıs Involvi	ing Interested F	erso
	<u> </u>						

Wild

Allen

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (d) Description of transaction (a) Name of interested person (b) Relationship (c) Amount of (e) Sharing between interested transaction person and the organization's organization revenues? Yes No (3) Ebony Carter Spouse of officer Dedric 356.611 | Employment Nο Carter (1) Barbara Cohlan Spouse of officer David 368,320 | Employment No Perlmutter

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (d) Description of transaction (a) Name of interested person (b) Relationship (c) Amount of (e) Sharing between interested transaction person and the organization's organization revenues? Yes No (5) Gerald Early Spouse of officer Ida 388.136 | Employment Nο Early Daughter of officer Ida (1) Rosalind Early 79,913 | Employment No

Early

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (d) Description of transaction (a) Name of interested person (b) Relationship (c) Amount of (e) Sharing between interested transaction person and the organization's organization revenues? Yes No (7) Denise Field Spouse of former 25.854 | Employment Nο officer Michael Cannon (1) Molly Mulligan Daughter-in-law of 77.520 | Employment No

trustee David Conner

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (d) Description of transaction (a) Name of interested person (b) Relationship (c) Amount of (e) Sharing between interested transaction person and the organization's organization revenues? Yes No (9) Andrew Sobel Spouse of officer 238.257 | Employment Nο Pamela Lokken (1) Anthony Tillman Spouse of officer Lori 218,944 | Employment No

White

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Sharing between interested transaction person and the organization's organization revenues? No Yes (11) Eric Upin Trustee WUIMC 360.000 | Consulting fees Nο Executive Board Chair (1) Enterprise Holdings Inc Trustee Andrew Taylor 473,749 Auto leasing, auto rentals, fleet Nο and family own more mamt

than 35 of Enterprise

(d) Description of transaction (a) Name of interested person (b) Relationship (c) Amount of (e) Sharing between interested transaction person and the organization's organization revenues? No Yes (13) Kingdom Capital LLC Trustee David Steward 847.790 | Funding for WU-lead research. No owns more than 35 of licensing agmt the company

235,088 Purchase foodstuff, supplies, gift

cards, et al.

No

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

Trustee Craig Schnuck

than 35 of the company

and family own more

(1) Schnuck Markets Inc

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Sharing between interested transaction person and the organization's organization revenues? No Yes (15) Third Degree Glass Factory Trustee James 92.015 Custom engraving, provision of Nο McKelvev is 100 owner alassblowing instruction (1) World Wide Technology Inc Trustee David Steward 7,441,370 | Computer licensing and Nο

maintenance, computer supplies,

and consulting

owns more than 35 of

the company

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons (a) Name of interested person (b) Relationship (c) Amount of (d) Description of transaction (e) Sharing between interested transaction person and the organization's organization revenues? Yes No 55,000,679 Rental of property, independent (17) Substantial Contributor Substantial Contributor No contractor arrangement, sale of assets

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493137030751 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** WASHINGTON UNIVERSITY 43-0653611 Part I **Types of Property** (b) (c) (d) (a) Check if Number of contributions or Method of determining Noncash contribution applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1 Art—Works of art . . 5,413 Opinion of expert/appraisal Art—Historical treasures 3 Art—Fractional interests Books and publications Χ 1,806 Fair market value Clothing and household 4,012 Fair market value Χ . . . . . Cars and other vehicles Boats and planes . Intellectual property . . 278 Χ Securities—Publicly traded . 26,354,068 Quoted mkt price - date of gift 10 Securities—Closely held stock . Securities—Partnership, LLC, Χ 8,449 Discounted value of amt rcvd or trust interests . . . . 12 Securities—Miscellaneous . Qualified conservation contribution-Historic structures . . . 14 Qualified conservation contribution—Other . Real estate—Residential 2,302,500 Fair market value 15 Real estate—Commercial . 17 Real estate—Other . 18 Collectibles . . . Χ 5 84 Donor estimate 19 Food inventory . . . Χ 9,505 Fair market value 20 Drugs and medical supplies . **21** Taxidermy . . . . . 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . Χ 16 Historical 16 No value provided 25 Other ▶ ( documents 26 Other ▶ ( Equipment ) Χ 4,966,602 Opinion of expert/appraisal Χ 140 Fair market value 27 Other ▶ ( Event tickets ) 28 Other ▶ (. Number of Forms 8283 received by the organization during the tax year for contributions 29 10 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a Nο **b** If "Yes," describe the arrangement in Part II. 31 Yes Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. Schedule M (Form 990) (2019) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2019)	Page 2
is reporting in Part I,	mation. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization column (b), the number of contributions, the number of items received, or a combination of both. Also any additional information.
Return Reference	Explanation
Part I Line ALL	- Column b - Amounts reported in column b of Part I are the number of contributions received.
Part I Line 1	- Revenue was not reported on line 1 for art works that were placed in collections, which, as permitted under SFAS 116, are not capitalized nor reported as revenue when received.
Part I Line 4	- Revenue was not reported on line 4 for books and publications that were placed in collections, which, as permitted under SFAS 116, are not capitalized nor reported as revenue when received.
	Schedule M (Form 990) (2019)

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493137030751 OMB No. 1545-0047 SCHEDULE O Supplemental Information to Form 990 or 990-EZ 2019 (Form 990 or 990-Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. EZ) ▶ Attach to Form 990 or 990-EZ. Open to Public ▶ Go to www.irs.gov/Form990 for the latest information. Department of the Treasury Inspection **Employer identification number** Name! Betherofgamization WASHINGTON UNIVERSITY 43-0653611 990 Schedule O. Supplemental Information Return **Explanation** Reference Form 990. contd encompass most areas of scholarship and professional training, with interschool cent Part I. Line 1 ers and institutes, libraries, computing facilities, athletic programs and undergraduate a nd graduate housing. The University offers undergraduate and graduate degrees and sponsors interdisciplinary institutes and centers engaged principally in research and advanced tra ining. Many educational programs include one or more practicum or experiential learning co mponents. The School of Medicine WUSM is among the leading medical research institutions i n the nation. WUSM carries out its educational, research, and clinical programs through 23 departments, approximately 60 divisions, and 4 programs in allied health professions, and provides patient care as part of its educational and research programs. WUSM provides eme rgency and non-emergency medical care to all patients in its community, including those wh o are underinsured and non-insured as well as those who have adequate insurance coverage o r the ability to pay for such care.

Return Explanation

Form 990,
Part I, Line 6
Part I, Lin

Return Reference	Explanation
Form 990, Part III, Line 1	Washington Universitys mission is to discover and disseminate knowledge, and protect the f reedom of inquiry through research, teaching and learning. Washington University creates a n environment to encourage and support an ethos of wide-ranging exploration. Washington Universitys faculty and staff strive to enhance the lives and livelihoods of students, the p eople of the greater St. Louis community, the country, and the world. Our goals are to wel come students, faculty, and staff from all backgrounds to create an inclusive community th at is welcoming, nurturing, and intellectually rigorous to foster excellence in our teaching, research, scholarship, and service to prepare students with attitudes, skills, and hab its of lifelong learning and leadership thereby enabling them to be productive members of a global society and to be an institution that excels by its accomplishments in our home community, St. Louis, as well as in the nation and the world. To this end we intend to judg e ourselves by the most exacting standards to attract people of great ability from diverse backgrounds to encourage faculty and students to be bold, independent, and creative think ers to provide an exemplary, respectful, and responsive environment for living, teaching, learning and working for present and future generations and to focus on meaningful measura ble results for all of our endeavors.

Return Explanation
Reference

Form 990,
Part III, Line
4d

Clude the central and school libraries, animal care, environmental compliance, the Deans offices, school information systems, school-specific human resource activities, and human research participant protection.

990 Schedule O, Supplemental Information Return Explanation Reference

Form 990,
Part V, Line

Chile, China, France, Germany, Italy, Spain, Uganda, and United Kingdom

D - 4.....

Reference	Explanation
Form 990, Part VI, Section A, Line 1a	The Executive Committee is composed of The Chair, Vice Chairs, Chancellor and not less tha n six voting members of The Board of Trustees appointed by The Board at its annual meeting. The Executive Committee is subordinate and responsible to The Board of Trustees. In the interval between meetings of The Board of Trustees, the Executive Committee has and may exercise all powers of The Board of Trustees except i to approve or authorize amendments to the Charter or Bylaws or other major changes In the organization of the University or, except as authorized or delegated by resolution of The Board of Trustees, the creation of any debt encumbering any property of the University, ii to select recipients of Honorary Degrees, iii to grant diplomas, iv to approve budgets, v to grant tenure, and vi to act on mat ters as regards which other specific directions have been given by The Board of Trustees.

Evalenation

Return Explanation
Reference

Form 990,
Part VI,
Section A,
Line 2

Trustees David Kemper and Andrew Taylor have a business relationship. Trustees David Kempe
r and Diane Sullivan have a business relationship. Trustees Diane Sullivan and Andrew Tayl
or have a business relationship

990 Schedule O, Supplemental Information

Return Explanation

full Board. All reviews take place prior to filing the return.

Deference

Reference	
Form 990,	The Form 990 is initially prepared by the Universitys Tax Department and then reviewed by
Part VI,	the Universitys tax preparers. Their review is thorough and provides sufficient assurance
Section B,	for them to sign as paid preparers. The return is then reviewed by the Universitys Control
Line 11b	ler who signs the return and its CFO. It is then reviewed with the Universitys Board of Tr
	ustees Audit Committee. Following their review, the final return is made available to the

Return Reference	Explanation
Form 990, Part VI, Section B, Line 12c	The University regularly monitors and enforces compliance with its conflict of interest po licies COI Policies, which include the Policy on Institutional Conflict of Interest, Resea rch Conflicts of Interest Policy and the Policy on Conflicts of Interest in Clinical Care.  Each of the foregoing COI Policies established a dedicated committee, comprised of facult y and staff, to assess the financial relationships of faculty and determine whether a COI exists and a management plan warranted. Faculty involved in research are required to disclose annually their financial interests or within 30 days of a new financial relationship.  The financial disclosures are circulated to the three COI committees for COI evaluation. The Research COI and the Institutional COI committees regularly monitor faculty compliance with their management plans. If the committees determine that a faculty member is not in compliance with a management plan, the matter is investigated by the committees and appropriate action taken. The University Compliance Office annually audits clinical faculty members compliance with management plans imposed by the Clinical COI committee. Any noncompliance is addressed and remediated by the faculty members department.

t to which she/he has a conflict of interest.

Return

Reference	Explanation
Form 990, Part VI, Section B, Line 12c	contd Disclosures by staff employees are made to their immediate supervisors. Disclosures by officers and Deans are made to the Chancellor for resolution, and the Chancellor report s on those and his own disclosures to the Chair of the Board. The Board of Trustees has ap proved a separate conflict of interest policy applicable to its members. Under that policy , members of the Board are required to make annual disclosure of existing or prospective m atters that reasonably create an actual or potential conflict of interest involving the Un iversity including 50 or more affiliated entities and the member including certain affilia ted business entities and family members. With certain limited exceptions, that policy fur ther requires a member to be excused from participation in or vote on a matter with respec

Explanation

Return Explanation
Reference

,	The recommended compensation of the Chancellor and all officers and key employees collecti
Part VI,	vely, the executive group is reviewed and approved annually by the Compensation Committee,
Section B,	a committee of independent voting members of the Board of Trustees. The Committees discus
Line 15	sion and review includes examination of the F.W. Cook and Companys executive compensation
	consultants market analysis comprised of multiple third-party sources of comparator market
	data specific to those institutions wtih which the University compares itself.

s and decisions are contemporaneously substantiated in its minutes.

D -4.....

Reference	Explanation
Form 990, Part VI,	contd This includes available market data provided by industry specific professional organ izations including most recently available Form 990s. The Chairman of the Board of Trustee
Section B,	s makes a recommendation to the Committee for the Chancellors compensation. The Chancellor
Line 15	recommends to the Committee the compensation of all officers. The Committees deliberation

Cumlomotion

Return Explanation
Reference

Form 990,
Part VI,
Section C,
Line 19

The University makes its charter, conflict of interest policy, and annual reports available to the public through the University website see 990 Page 1 Box J.

Return Reference	Explanation
Form 990, Part VII, Section A, Line 1a	Column D - Reportable compensation for officers Blasingame, Thorp, and Webber and former o fficer Cannon include a distribution or vesting of amounts under nonqualified deferred com pensation plans reviewed and approved by the Compensation Committee of the Board of Truste es, individually or as part of their overall compensation. The amounts distributed or vest ed for officer Blasingame and former officer Cannon, among other amounts, are reported on Schedule J, Part II, column Biii. The amounts deferred for officers Thorp and Webber, amon g other amounts, are reported on Schedule J, Part II, column C.

Return Reference	Explanation
Form 990, Part VII, Section A, Line 26	Trustee Eric Upin served as Executive Board Chair of the Washington University Investment Management Company during fiscal year 2020. During this period, Trustee Upin devoted an av erage of 12 hours per week in his capacity as Executive Board Chair. Additionally, Trustee Upin was compensated for consulting services provided in this capacity and received reimb ursement for reasonable travel and lodging expenses. During the period of July 1, 2019 - J une 30, 2020, Trustee Upin devoted an average of 1.5 hour per week to the university in hi s capacity as a Member of the Board of Trustees.

Return Explanation
Reference

Form 990, Part XI, Line

1,611,365 of changes and reclassifications in split-interest agreements and a 3,292,914 change in uncollectible pledges.

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE R** 

As Filed Data -

#### **Related Organizations and Unrelated Partnerships**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

DLN: 93493137030751 OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

WASHINGTON UNIVERSITY

(Form 990)

► Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection **Employer identification number** 

43-0653611

Part I Identification of Disregarded Entities. Compl	ete if the orgar	nization answ	ered "Yes	s" on Forn	n 990, Part	IV, line	33.					
See Additional Data Table		1 (1)		1 ,	->	1 44	,	1 (-)				
(a) Name, address, and EIN (if applicable) of disregarded entity		<b>(b)</b> Primary activity		(c) Legal domicile (state or foreign country)		(d) Total income		(e) End-of-year	assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organiz	ations. Compl	 ete if the org	anization	answered	l "Yes" on i	 =orm 99	0, Part	 IV, line 34 l	pecause	e it had one or	more	
related tax-exempt organizations during the tax ye	ear.	<i>(</i> 1.)	1 ,	-3	1 (1)			(-)		(6)	<del>,</del>	>
(a) Name, address, and EIN of related organization	Prima	<b>(b)</b> ary activity	Legal dom	c) icile (state i country)	(d) Exempt Cod		(e) Public charity status (if section 501(c)(3))		Dir	<b>(f)</b> rect controlling entity	(g) Section 512(b (13) controlle entity?	
											Yes	No
(1)Barnard Free Skin & Cancer Hospital (Barnard Cancer Institute) 4590 Childrens Place CB 8092 St Louis, MO 63110	Cancer pa	tient care	МО		501c3		12a		Washing	ton University	Yes	
43-6033760												
(2)BioSTL 4340 Duncan Ave	Scientific i	research	N	10	501c3		7		Washing	ton University	Yes	
St Louis, MO 63110 45-2137574												
(3)Gateway Higher Education Cybersecurity Consortium One Brookings Dr CB 1058	Member si	upport services	, n	10	501c3		12a		N/A			No
St Louis, MO 63130 83-2206585												
(4)Quadrangle Housing Company 700 Rosedale Ave CB 1034	Member si	upport services	, n	10	501c3		12a		Washing	ton University	Yes	
St Louis, MO 63112 43-1767210												
(5)Quadrangle Management Company 700 Rosedale Ave CB 1034	Property t company	itle holding	holding M		501c25				Washing	ton University	Yes	
St Louis, MO 63112 43-1558136												
(6)Washington University Medical Center 1408 Tower Grove Ave	Member si	upport services	services		501c3		12a		N/A			No
St Louis, MO 63110 23-7060605												
(7)Washington University Physicians in Illinois Inc 1515 Cross St	Patient Ca	re		IL	501c3		12a		Washing	ton University	Yes	
O Fallon, IL 62269 82-2026363												
For Paperwork Reduction Act Notice, see the Instructions for Fo	orm 990.		Ca	t. No. 5013	35Y				Sch	edule R (Form	990) 2	019

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

See Additional Data Table		(b)	1 .					1 .							
(a)  Name, address, and EIN of related organization			(c) Legal domicile (state or foreign country)	entity	inco u exc t	(e) edominant ome(related, unrelated, cluded from tax under ctions 512- 514)	(f) Share of total incom	Share of end-of-year assets	Disprop		Code amou 2 Sche	(i) e V-UBI nt in box 20 of dule K-1 n 1065)	(j Gener mana partr	al or I ging	<b>(k)</b> Percentage ownership
						J14)			Yes	No			Yes	No	
Part IV Identification of Related Orga because it had one or more relat							zation ans	wered "Ye	s" on F	orm 9	990, 1	Part IV	, line	34	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controlling entity		(e) Type of end (C corp, sorp, or trust)	ity Sha	<b>(f)</b> re of total ncome	(g) Share of end-of-ye assets		-year	(h) ear Percentage ownership		(i) Section 512(b) (13) controlled entity?  Yes No	
(1)BOBB LLC	Real Estate	МО	• •	Parallel Properties		C Corp		5,427,519	43,715,94		,941	100.000 %		Yes	
One Brookings Drive CB 1058 St Louis, MO 63130 32-0423075				LLC											
(2)Corre Horizon Offshore Fund LP  12 East 49th St 40th Floor New York, NY 10017	Investment	CJ		Washington University			:orp		76,50		76,500,338		100.000 %		3
98-1437030 (3)Dyal James Cayman LP	Investment	CJ		Washington		C Corp		-129,402		959	,332	72.73	30 %	Yes	
1290 Ave of the Americas 24th floor New York, NY 10104 98-1243524				University				,			,				
(4)Kora Holdings I Offshore Fund Ltd  PO Box 309 Ugland House S Church St George Town, Grand Cayman CJ 98-1506261	Investments	CJ		Washington University				13,032,821		54,140	,285	100.0	000 %	Yes	3
(5)Parallel Properties LLC	Real Estate	МО		Washington		C Corp		1,294,583		10,667	,901	100.0	000 %	Yes	;
One Brookings Drive CB 1058 St Louis, MO 63130 45-3714626				University											
(6)SCHF I-3 WU LP	Investments	UK		Washington		C Corp		-50,819		1,539	,390	100.0	000 %	Yes	;
700 Rosedale Ave CB 1034 St Louis, MO 631121408 98-0464397				University											
(7)Washington University Physicians Network	Service fee negotiation	MO		Washington University		C Corp		1,022,978		28	,541	100.0	000 %	Yes	3
4240 Duncan Ave Suite 301 St Louis, MO 63110 43-1660462															

edule R (Form 990) 2019					Pa	ge <b>3</b>
art V Transactions With Related Organizations. Complete if the organization answered "Ye	es" on Form 990, Pa	rt IV, line 34, 35b	, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
During the tax year, did the orgranization engage in any of the following transactions with one or more related	organizations listed in	Parts II-IV?				
Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a	Yes	
Gift, grant, or capital contribution to related organization(s)				<b>1</b> b	Yes	
Gift, grant, or capital contribution from related organization(s)				1c	Yes	
d Loans or loan guarantees to or for related organization(s)				<b>1</b> d	Yes	
Loans or loan guarantees by related organization(s)				1e		No
Dividends from related organization(s)				1f	Yes	
g Sale of assets to related organization(s)				<b>1</b> g	Yes	
n Purchase of assets from related organization(s)				1h		No
Exchange of assets with related organization(s)			•	<b>1</b> i		No
Lease of facilities, equipment, or other assets to related organization(s)				<b>1</b> j		No
Lease of facilities, equipment, or other assets from related organization(s)				1k	Yes	
Performance of services or membership or fundraising solicitations for related organization(s)				11	Yes	
n Performance of services or membership or fundraising solicitations by related organization(s)				1m	Yes	
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes	
Sharing of paid employees with related organization(s)				10	Yes	
Reimbursement paid to related organization(s) for expenses				<b>1</b> p		No
Reimbursement paid by related organization(s) for expenses				<b>1</b> q	Yes	
Other transfer of cash or property to related organization(s)				1r	Yes	
Other transfer of cash or property from related organization(s)				1s	Yes	
If the answer to any of the above is "Yes," see the instructions for information on who must complete this lin	ne, including covered r	relationships and tran	nsaction thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	<b>(d)</b> Method of determining	amount i	nvolved	ı

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	or	(e) e all partners section 501(c)(3) ·ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General d managin partner?	g ?	(k) Percentage ownership
			317)	Yes	No			Yes	No		Yes	No	
										Schedul	e R (Form	1990	0) 2019

Schedule R (Form 990) 2019									
Part VII	Supplemental Information								
	Provide additional infor	mation for responses to questions on Schedule R. (see instructions).							
Return Reference		Explanation							

**Software ID:** 19009610 **Software Version:** 19.2.1.0

**EIN:** 43-0653611

Name: WASHINGTON UNIVERSITY

Form 990, Schedule R, Part I - Identification of Disregarded Entities

Form 990, Schedule R, Part 1 - Identification of Disregarded Er		1	l I		I
<b>(a)</b> Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary Activity	(c) Legal Domicile (State or Foreign Country)	<b>(d)</b> Total income	(e) End-of-year assets	<b>(f)</b> Direct Controlling Entity
Arch Pediatrics LLC 660 South Euclid St Louis, MO 63108 82-5262785	Patient Care	МО	3,554,920	35,273	WUCA LLC
Cardiothoracic Surgery North LLC 11155 Dunn Rd Suite 209E St Louis, MO 63136 36-4301434	Patient Care	МО	1,208,319		Washington University
MIRACL LLC 660 South Euclid St Louis, MO 63108 61-1904605	Patient Care	МО	3,972,606		Washington University
Premier Pediatrics LLC 660 South Euclid St Louis, MO 63108 82-5415317	Patient Care	МО	4,298,619	196,952	WUCA LLC
Purely Pediatrics LLC 660 South Euclid St Louis, MO 63108 30-0957830	Patient Care	МО	2,235,133	244,758	WUCA LLC
Quadrangle Pharmacy LLC One Brookings Dr CB 1058 St Louis, MO 63130 43-0653611	Student pharmacy services	МО	896,080	126,785	Washington University
SCHF I-3 Investor WU GP LLC 700 Rosedale Ave CB 1034 St Louis, MO 63112 43-0653611	Financial investment manager	DE			Washington University
University Pediatric Associates LLC 660 South Euclid St Louis, MO 63108 30-0871000	Patient Care	МО	1,892,431	82,987	WUCA LLC
Washington University Clinical Associates - Blue Fish LLC 660 South Euclid St Louis, MO 63108 61-1740030	Patient Care	МО	5,726,164	366,412	WUCA LLC
Washington University Clinical Associates - Child Neurology LLC 660 South Euclid St Louis, MO 63108 36-4730841	Patient Care	МО	7,990	778	WUCA LLC
Washington University Clinical Associates - Cloverleaf Pediatrics LLC 660 South Euclid St Louis, MO 63108 37-1770035	Patient Care	МО	3,130,253	259,228	WUCA LLC
Washington University Clinical Associates - Fenton Pediatrics LLC 660 South Euclid St Louis, MO 63108 35-2641104	Patient Care	МО	3,086,941	585,143	WUCA LLC
Washington University Clinical Associates - Forest Park Pediatrics LLC 660 South Euclid St Louis, MO 63108 61-1696383	Patient Care	МО	4,425,432	242,599	WUCA LLC
Washington University Clinical Associates - Kids Docs LLC 660 South Euclid St Louis, MO 63108 35-2548685	Patient Care	МО	2,095,409	162,962	WUCA LLC
Washington University Clinical Associates - Maryland Medical LLC 660 South Euclid St Louis, MO 63108 27-2046978	Patient Care	МО	2,943,978	458,321	WUCA LLC
Washington University Clinical Associates - Nash Pediatrics LLC 660 South Euclid St Louis, MO 63108 37-1802234	Patient Care	МО	967,473		WUCA LLC
Washington University Clinical Associates - Northwest Pediatrics LLC 660 South Euclid St Louis, MO 63108 35-2458831	Patient Care	МО	5,636,465	649,247	WUCA LLC
Washington University Clinical Associates - O'Fallon Pediatrics LLC 660 South Euclid St Louis, MO 63108 32-0453423	Patient Care	МО	5,866,211	1,261,406	WUCA LLC
Washington University Clinical Associates - University Personal Physicians 660 South Euclid St Louis, MO 63108 26-3917142	Patient Care	МО	1,448,129	733,073	WUCA LLC
Washington University Clinical Associates - Westside Pediatrics LLC 660 South Euclid St Louis, MO 63108 35-2581863	Patient Care	МО	2,948,243	10,805	WUCA LLC

Form 990, Schedule R, Part I - Identification of Disregarded Entities (a)
Name, address, and EIN (if applicable) of disregarded entity (b)

WUCare LLC

St Louis, MO 63108 43-0653611

St Louis, MO 63130 61-1711507

St Louis, MO 63130 61-1711507

WUSTL Advisors (Shanghai) Co Ltd

One Brookings Dr CB 1058

WUSTL International LLC

One Brookings Dr CB 1058

, шал осо, ала дал (п арричало, от ало одагаса отпо,	, , , , , , , , , , , , , , , , , , , ,	(State or Foreign Country)		Zila di year assets	Entity
Washington University Clinical Associates - Woods Mill Pediatrics LLC 660 South Euclid St Louis, MO 63108 37-1829105	Patient Care	МО	1,512,960	67,257	WUCA LLC
Washington University Clinical Associates LLC 660 South Euclid St Louis, MO 63108 20-0708217	Patient Care	МО	7,830,380	14,509,201	Washington University
Washington University Regional Physicians LLC 660 South Euclid St Louis, MO 63108 82-3109456	Patient Care	МО			Washington University
Washington University Uganda Ltd One Brookings Dr CB 1058 St Louis, MO 63130 61-1711507	Manage international activity	UG	306,720	53,508	WUSTL International LLC
William Greenleaf Eliot Seed Fund Investor LLC One Brookings Dr CB 1058 St Louis, MO 63130 81-3046439	Financial investment manager	МО		19,560	Washington University

(c)

Legal Domicile

(State

CH

MO

(d)

Total income

295

1,071

(e)

End-of-year assets

835,547 WUCA LLC

414,852 WUSTL International LLC

2,193 Washington University

**(f)** Direct Controlling

St Louis, MO 63130 61-1711507					
William Greenleaf Eliot Seed Fund Investor LLC One Brookings Dr CB 1058 St Louis, MO 63130 81-3046439	Financial investment manager	МО		19,560	Washington Universi
William Greenleaf Eliot Seed Fund Manager LLC One Brookings Dr CB 1058 St Louis, MO 63130 81-3003790	Financial investment manager	МО		27	Washington Universi
WUCA - Southwest Pediatrics LLC	Patient Care	MO	7,437,633	500,862	WUCA LLC

Manage international

Manage international

activity

activity

Primary Activity

rsity 660 South Euclid St Louis, MO 63108 32-0554062

### Patient Care МО 660 South Euclid

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (e) (h) General Legal (f) (g) Disproprtionate (k) Predominant (a) Code V-UBI amount in Share of total Domicile Direct Share of end-ofor Name, address, and EIN of income(related, allocations? Percentage Primary activity Managing (State Controlling income year assets Box 20 of Schedule ownership related organization unrelated. Entity K-1 Partner? or excluded from Foreign (Form 1065) tax under Country) sections 512-514) Yes No Yes No 6188 McPherson LLC -1,882 Real Estate MO Parallel Excluded No No 100.000 % Properties LLC One Brookings Dr CB 1058 St Louis, MO 63130 46-0641754 8VC SPV IA LP DE Washington Excluded 10,432 9,593,282 No No 66.000 % Investment University 425 Sherman Ave Suite 120 Palo Alto, CA 94306 30-0885126 Big Brick Buildings ML LLC Real Estate МО BOBB LLC Excluded -6,234 11,425,508 No 90.100 % No One Brookings Dr CB 1058 St Louis, MO 63130 82-1906099 Big Brick Buildings MT LLC Real Estate MO BOBB LLC Related -2,626 1,130,980 No No 1.000 % One Brookings Dr CB 1058 St Louis, MO 63130 82-3761088 Castlereagh ML LLC МО BOBB LLC -548,883 14,537,378 Real Estate Excluded No No 90.100 %

BOBB LLC

BOBB LLC

BOBB LLC

Washington

University

BOBB LLC

**BOBB LLC** 

Washington

University

BOBB LLC

BOBB LLC

Washington

University

Related

Excluded

Related

Excluded

Excluded

Excluded

Excluded

Excluded

Related

Excluded

MO

MO

МО

DE

МО

МО

DE

MO

МО

DE

-2,211

-1,589,524

-4,739

8,020,355

-674,905

-2,805

2,148,165

-7,870

112,112

34,285,625

129,336

62,112,446

41,918,965

174,855

38,016,158

10,956,420

33,562

91,605,012

No

1.000 %

90.100 %

1.000 %

73.760 %

90.100 %

1.000 %

60.000 %

90.100 %

1.000 %

69,720 %

One Brookings Dr CB 1058 St Louis, MO 63130 81-2578815

One Brookings Dr CB 1058 St Louis, MO 63130 82-0881545 Clayton Euclid ML LLC

One Brookings Dr CB 1058 St Louis, MO 63130 81-2764555

One Brookings Dr CB 1058 St Louis, MO 63130 82-1124230

One Brookings Dr CB 1058 St Louis, MO 63130 82-1921163 Crescent MT LLC

One Brookings Dr CB 1058 St Louis, MO 63130 82-3700737

DECATHLON ALPHA IV LP

One Brookings Dr CB 1058 St Louis, MO 63130 47-2994311

One Brookings Dr CB 1058 St Louis, MO 63130 47-5294794 ECLIPSE SPV I LP

514 High Street Suite 4 Palo Alto, CA 94301 82-5079677

Eastgate ML LLC

Eastgate MT LLC

1441 West Ute Blvd Suite 240 Park City, UT 84098 83-1157736

COLISEUM CAPITAL PARTNERS Investment

Clayton Euclid MT LLC

105 Rowayton Ave Rowayton, CT 06853 46-1301579

Crescent ML LLC

II LP

Real Estate

Real Estate

Real Estate

Real Estate

Real Estate

Investment

Real Estate

Real Estate

Investment

Castlereagh MT LLC

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (h) (e) Legal General (g) Predominant income(related, Disproprtionate (k) (b) Direct Share of total Share of end-of-Code V-UBI amount ir or Domicile Name, address, and EIN of allocations? Percentage Primary activity (State Controlling Box 20 of Schedule Managing income year assets ownership related organization unrelated. Entity Partner? excluded from Foreign (Form 1065) tax under Country sections 512-514) Yes No Yes No Elm Park Credit Opportunities Investment DE Washington Excluded -3,962,899 3,992,698 No No 70.360 % Fund LP University 2300 N Field St Suite2180 Dallas, TX 75201 45-2685002 EQMC PARTNERS LP 4,477,937 140,356,503 DE Washington Excluded Νo No 51.860 % Investment University 48 WALL ST FL27 New York, NY 10005 47-4281379 5,591,504 Foundation Energy Fund V-B LP Investment DE 33,899,185 Washington Excluded No Νo 64.100 % University 5057 Keller Springs Rd Suite Addison, TX 75001 46-5755749 GRANITE TUNNEL PARTNERS 15,785 51,195,042 Investment DE Washington Excluded No No 67.820 % (CAYMAN) LP University 63 CROSBY STREET 4TH New York, NY 10012 84-3041864 KINGSWAY FCF OVERFLOW -135,130 19,843,995 CJ lInvestment Washington Excluded No Νo 76.190 % SPC - SEGREGATED University PORTFOLIO THREE **CORPORATE CENTRE 27** HOSPITAL ROAD Georgetown, Grand Cayman 98-1498619 -3,837,398 74,454,332 KORA RUSSIA FUND LP Investment DE Washington Excluded No No 73.030 % University 55 Prospect St Suite 310 Brooklyn, NY 11201 98-1398361 KURAMO AFRICA DE Washington 458,948 20,807,753 76.920 % Excluded Νo Investment No OPPORTUNITY CO-University INVESTMENT VEHICLE III LP 500 5th Ave 44th Floor New York, NY 10110 82-4762558 -46.756 1,787,136 KURAMO AFRICA Investment DE Washington Excluded No No 66.000 % OPPORTUNITY FUND III LP University 500 5th Ave 44th Floor New York, NY 10110 82-4747981 Lewis Center ML LLC BOBB LLC -29,554 25,259,626 Real Estate Excluded Νo No 100.000 % One Brookings Dr CB 1058 St Louis, MO 63130 47-3015612 Lewis Center MT LLC Real Estate МО BOBB LLC Excluded -2,461 8,269 No No 100.000 % One Brookings Dr CB 1058 St Louis, MO 63130 47-4490012 LIBERTADOR PARTNERS LP DE Washington Excluded 42,318 89,798,388 No No 95.290 % Investment University 63 Crosby St 4th Floor New York, NY 10012 83-2239641 McPherson Master Tenant LLC Real Estate MO Parallel Related -801 No No 100.000 % Properties LLC One Brookings Dr CB 1058 St Louis, MO 63130 38-3915678 NDFY14 Master Tenant LLC Real Estate МО BOBB LLC Related 356 No Νo 100.000 % One Brookings Dr CB 1058 St Louis, MO 63130 46-4787961 North Delmar FY14 LLC Real Estate МО BOBB LLC Excluded -86.398 No No 100.000 % One Brookings Dr CB 1058 St Louis, MO 63130 90-1030904 Page Field Commons Holdings Excluded 151,885 32,162,606 No No 76.400 % Investment Washington University 150 Baker Ave Ext Suite 303 Concord, MA 01742 82-3087660

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership (j) (c) (h) General Legal (d) (f) (g) Disproprtionate (k) Predominant (a) (b) Direct Domicile Share of total Share of end-ofallocations? Percentage Code V-UBI amount in Name, address, and EIN of Primary activity income(related, Managing (State Controllina income year assets ownership Box 20 of Schedule K-1 related organization unrelated. Partner? Entity excluded from (Form 1065) Foreign tax under Country) sections 512-514) Yes No Yes No SESSA CAPITAL SPECIAL DE 10,726,157 103,346,334 Investment Washington Excluded No No 57.280 % OPPORTUNITY FUND II LP University 888 7th Ave 30th Floor New York, NY 10019 82-4890968 17,947,895 SKDB FY14 LLC Real Estate МО Івовв ііс Excluded -64,061 Νo 89.100 % No One Brookings Dr CB 1058 St Louis, MO 63130 38-3919595 Related 669 38,056 SKDB MT LLC Real Estate MO BOBB LLC 1.000 % Νo No One Brookings Dr CB 1058 St Louis, MO 63130 47-3421569 St Louis Internet2 Access МО -60,264 84,950 -60,264 Internet Access Washington Unrelated No Yes 60.570 % Consortium LLC University 700 Rosedale Ave CB 1034 St Louis, MO 63112 47-0849522

294,756

8,182

807

315,205

-12,483

15,572,401

66,607,565

4,662,460

4,348,916

22,734,202

19,460

No

No

No

Nο

Νo

No

51.720 %

63.860 %

90.000 %

90.000 %

67.500 %

29.420 %

No

No

No

No

No

No

St Louis Land Company LLC

4320 Forest Park Ave Suite

St Louis, MO 63108 13-4229138

TL TARGETED FUND LP

712 5th Avenue 9th Floor New York, NY 10019 82-4300985

WE 113 North Maple St

150 Baker Ave Ext Suite 303 Concord, MA 01742 82-1205603

150 Baker Ave Ext Suite 303 Concord, MA 01742 82-3046857

WE Industrial Portfolio LLC

150 Baker Ave Ext Suite 303 Concord, MA 01742 35-2576623

William Greenleaf Eliot Seed

One Brookings Dr CB 1058

St Louis, MO 63130 81-3029864

Fund LLC

WE 137 Lathrop Road Holdings Investment

Holdings LLC

201

Real Estate

Investment

Investment

Investment

Investment

Washington

Washington

Washington

Washington

Washington

University

William

Greenleaf Eliot Seed Fund

Manager LLC

University

University

University

University

DE

DE

DE

МО

Excluded

Excluded

Excluded

Excluded

Excluded

Excluded

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (b) (c) (d) (e) (f) (g) (h) (i) (a) Name, address, and EIN of Primary activity Legal Direct controlling Type of entity Share of total Share of end-of-year Percentage Section 512 related organization domicile entity (C corp, S corp, income assets ownership (b)(13)(state or foreign controlled or trust) entity? country) Yes No 43,715,941 **BOBB LLC** Real Estate MO Parallel Properties C Corp 5,427,519 100.000 % Yes One Brookings Drive CB 1058 LLC St Louis, MO 63130 32-0423075 Corre Horizon Offshore Fund LP Investment CJ Washington C Corp 6,421,630 76,500,338 100.000 % Yes 12 East 49th St 40th Floor University New York, NY 10017

98-1437030									
Dyal James Cayman LP 1290 Ave of the Americas 24th floor New York, NY 10104 98-1243524	Investment		Washington University	C Corp	-129,402	959,332	72.730 %	Yes	
Kora Holdings I Offshore Fund Ltd PO Box 309 Ugland House S Church St George Town, Grand Cayman CJ 98-1506261	Investments		Washington University		13,032,821	54,140,285	100.000 %	Yes	
Parallel Properties LLC	Real Estate	МО	Washington	C Corp	1,294,583	10,667,901	100.000 %	Yes	

C Corp

C Corp

-50.819

1,022,978

1.539.390

28,541

100.000 %

100.000 %

Yes

Yes

Washington

Washington

University

University

University

UK

МО

Investments

Service fee negotiation

St Louis, MO 63130 45-3714626 SCHF I-3 WU LP

St Louis, MO 63110 43-1660462

98-0464397

One Brookings Drive CB 1058

700 Rosedale Ave CB 1034

4240 Duncan Ave Suite 301

Washington University Physicians Network

St Louis, MO 631121408

Form 990, Schedule R, Part V - Transactions With Related Organizations (b) (c) Transaction Amount Involved Name of related organization Method of determining amount involved type(a-s) 6188 McPherson LLC 69,994 Arms length transaction а BioSTL 634,556 Arms length transaction а BOBB LLC а 25,634 Arms length transaction Eastgate ML LLC 112,911 Arms length transaction а North Delmar FY14 LLC 90,712 Arms length transaction а Parallel Properties LLC 13,812 Arms length transaction а Quadrangle Housing Company 171,645 Arms length transaction а SKDB FY14 LLC 615,345 Arms length transaction а AHAN-I Ltd b 40,000,000 Cash contribution Arohi Emerging India Fund 70,000,000 Cash contribution b BioSTL b 1,500,000 Cash contribution Corre Horizon Offshore Fund LP b 60,144,703 Cash contribution Decathlon Alpha IV LP b 33,750,000 Cash contribution Elm Park Credit Opportunities Fund LP b 315,691 Cash contribution EQMC PARTNERS LP b 50,000,000 Cash contribution GRANITE TUNNEL PARTNERS (CAYMAN) LP b 50,000,000 Cash contribution KINGSWAY FCF OVERFLOW SPC - SEGREGATED PORTFOLIO THREE b 20,000,000 Cash contribution Kora Holdings I Offshore Fund Ltd b 50,000,000 Cash contribution Kora Russia Fund LP b 20,000,000 Cash contribution KURAMO AFRICA OPPORTUNITY CO-INVESTMENT VEHICLE III LP b 8,126,497 Cash contribution KURAMO AFRICA OPPORTUNITY FUND III LP b 1,540,998 Cash contribution SUSTAINABLE CAPITAL AFRICA ALPHA FUND b 80,000,000 Cash contribution Washington University Physicians in Illinois Inc b 53.045 Cash contribution Barnard Free Skin & Cancer Hospital (Barnard Cancer Institute) 800,000 Cash value С BOBB LLC 11,259,514 Arms length transaction

Form 990, Schedule R, Part V - Transactions With Related Organizations (b) (c) Name of related organization Transaction Amount Involved Method of determining amount involved type(a-s) Eastgate ML LLC 10,517,314 Arms length transaction Quadrangle Management Company d 895.023 Arms length transaction Quadrangle Management Company 558,328 Arms length transaction g Barnard Free Skin & Cancer Hospital (Barnard Cancer Institute) k 663,484 Arms length transaction Clayton Euclid MT LLC k 82,471 Actual cost Barnard Free Skin & Cancer Hospital (Barnard Cancer Institute) 116,891 Actual cost Quadrangle Housing Company 3,159,597 Arms length transaction Quadrangle Management Company Τ 100,816 Arms length transaction Arms length transaction Washington University Physicians in Illinois Inc 2,442,818 Washington University Physicians Network 778,384 Actual cost m BioSTL 1,596,610 Actual cost q Clayton Euclid MT LLC 71,099 Actual cost q Quadrangle Housing Company q 2,498,649 Actual cost Quadrangle Management Company Arms length transaction q 518,395 Washington University Physicians in Illinois Inc 19,935,277 Actual cost q Washington University Physicians Network 1,106,759 Actual cost q Barnard Free Skin & Cancer Hospital (Barnard Cancer Institute) 1,776,003 Fair Value r 6188 McPherson LLC 9,872,641 Arms length transaction s

1,004,480

5,464,735

19,164,500

1,979,185

173,115

2,554,103

3,105,865

s

s

s

s

s

s

Arms length transaction

Arms length transaction

Cash distribution

Cash distribution

Cash distribution

Cash distribution

Cash distribution

BOBB LLC

Charitable Remainder Trusts (15)

Decathlon Alpha IV LP

Eastgate ML LLC

COLISEUM CAPITAL PARTNERS II LP

Elm Park Credit Opportunities Fund LP

Foundation Energy Fund V-B LP

(a) (b) (c) Name of related organization Amount Involved (d) Transaction type(a-s) Method of determining amount involved 509,813 Cash distribution KURAMO AFRICA OPPORTUNITY CO-INVESTMENT VEHICLE III LP

8.868.688

46,017,568

641,250

s

Arms length transaction

Cash distribution

Cash distribution

Form 990, Schedule R, Part V - Transactions With Related Organizations

North Delmar FY14 LLC

Washington University Physicians in Illinois Inc

WE INDUSTRIAL PORTFOLIO LLC

		, ,	-
Page Field Commons Holdings LLC	S	945,662	Cash distribution
Pooled Interest Funds (2)	v	104 297	Cash distribution

Pooled Interest Funds (2)	S	104,297	Cash distribution
Page Field Commons Holdings LLC	S	945,662	Cash distribution

Pooled Interest Funds (2)	s	104,297	Cash distribution
Quadrangle Management Company	s	2,004,200	Arms length transaction

			1
Quadrangle Management Company	s	2,004,200	Arms length transaction

Quadrangle Management Company	s	2,004,200	Arms length transaction
SKDB FY14 LLC	s	298,296	Arms length transaction